Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Eastern District of New York	
Case number (# known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Id	entify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your ful	name		
governme identificati	name that is on your nt-issued picture on (for example,	William First name	 First name
passport).		Middle name Watson	Middle name
Bring you identificati with the tr	on to your meeting	Last name	 Last name
with the t	ustoo.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
have uso years	names you ed in the last 8 our married or ames.	ekokas kanasininga suberi sing bag indistri ab reconception sidiga di Circle settinga reconstruita de la construita de la con	
your Soc number Individu	last 4 digits of cial Security or federal al Taxpayer ation number	xxx - xx - 1 2 0 or 9 xx - xx	xxx - xx

Case number (if known)_

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in	✓ I have not used any business names or EINs.	I have not used any business names or EINs.
the last 8 years	Business name	Business name
Include trade names and		
doing business as names	Business name	Business name
	EN	EIN
	EIN	EIN
Where you live		If Debtor 2 lives at a different address:
	48-10 43rd Street	
	Number Street	Number Street
	Woodside NY 11377	
	City State ZIP Code Queens County	City State ZIP Coo
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Coo
Why you are choosing	Check one:	Check one:
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, have lived in this district longer than in any other district.
	I have another reason. Explain.	I have another reason. Explain.
	(See 28 U.S.C. § 1408.)	(See 28 U.S.C. § 1408.)

William Watson

Middle Name

Debtor 1

ebtor 1 William Watson				Case number (if kno	yn)	
First Name Midd	de Name	Last Name				
rt 2: Tell the Court A	bout Your B	Bankruptcy Case				
The chapter of the			ription of each, see <i>N</i> . Also, go to the top of		J.S.C. § 342(b) for Individuals Filing	g
Bankruptcy Code you are choosing to file	☑ Cha		. Also, go to tale top of	page I and one on the	appropriate son.	
under		pter 11				
	☐ Cha	pter 12				
	☐ Cha	pter 13				
How you will pay the fo	loca your subr with I nec App By la less pay	al court for more de reelf, you may pay mitting your payme a pre-printed addred to pay the fee in dication for Individual quest that my fee aw, a judge may, by than 150% of the other fee in installments.	etails about how you with cash, cashier's ent on your behalf, yeess. in installments. If yeals to Pay The Filling be waived (You may but is not required to official poverty line)	may pay. Typically scheck, or money of your attorney may pay our choose this option of Fee in Installment ay request this option, waive your fee, are that applies to your this option, you mu	isk with the clerk's office in your if you are paying the fee order. If your attorney is any with a credit card or check on, sign and attach the its (Official Form 103A). In only if you are filing for Chapited may do so only if your incomfamily size and you are unable st fill out the Application to Havith your petition.	oter 7 ne is
Have you filed for bankruptcy within the last 8 years?	☑\o □Ves. Distric	ct		When	Case number	
idot o youro,	Distric	ct		When	Case number	
	Distric		***************************************			
	Distric		******	vvnen	Case Hullibel	
Are any bankruptcy cases pending or being filed by a spouse who not filing this case with you, or by a business partner, or by an	is Yes.			R	elationship to you	
- Hillian A	District	***************************************		When	Case number, if known	
ı	Debtor			8 4	ationship to you	
					Case number, if known	
Do you rent your residence?	✓ No. Yes.	No. Go to line 1			Against Voy (Form 404A) and 51-14	ر المستقول
		Yes. Fill out Init this bankruptcy		n Eviction Judgment A	I <i>gainst You</i> (Form 101A) and file it	Wi

William Watson

Debt		Case number (# known)
	First Name Middle Nan	Last Name
Pa	Report About Any E	sinesses You Own as a Sole Proprietor
		——————————————————————————————————————
	Are you a sole proprietor of any full- or part-time	No. Go to Part 4.
	business?	Yes. Name and location of business
	A sole proprietorship is a	
	business you operate as an individual, and is not a	Name of business, if any
	separate legal entity such as a corporation, partnership, or	
	LLC.	Number Street
	If you have more than one	
	sole proprietorship, use a separate sheet and attach it	
	to this petition.	City State ZIP Code
		Check the appropriate box to describe your business:
		Health Care Business (as defined in 11 U.S.C. § 101(27A))
		Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
		Stockbroker (as defined in 11 U.S.C. § 101(53A))
		Commodity Broker (as defined in 11 U.S.C. § 101(6))
		None of the above
		If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor
	Are you filing under	choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you
	Chapter 11 of the Bankruptcy Code and	are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or
	are you a small business	if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
	debtor or a debtor as defined by 11 U.S. C. §	No. I am not filing under Chapter 11.
	1182(1)?	No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in
	For a definition of small	the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the
	business debtor, see 11 U.S.C. § 101(51D).	Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.
		Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the
		Bankrutpcy Code, and I choose to proceed under Subchatper V of Chapter 11.
Pa	rt 4: Report if You Own	Have Any Hazardous Property or Any Property That Needs Immediate Attention
14.	Do you own or have any	✓ No
	property that poses or is	Yes. What is the hazard?
	alleged to pose a threat of imminent and	THREE SHO HELLING.
	identifiable hazard to	
	public health or safety? Or do you own any	
	property that needs	If immediate attention is needed, why is it needed?
	immediate attention? For example, do you own	
	perishable goods, or livestock	
	that must be fed, or a building that needs urgent repairs?	
		Where is the property?

Debtor 1 Willia

William	Watson
AAIIIIGIII	vvalson:

First Name

Middle Name Last Name

Case number ((if known)	
	(" ///////	

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About	Debtor	1	:
-------	--------	---	---

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone or

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1	William Watson			Case n	umber (if known)	
		First Name Middle	e Name Last Name	е	•	Famulation	
Pa	rt 6:	Answer These Q	uestions for Repo	rting Purposes			
16.	What k	ind of debts do			onsumer debts? Cons narily for a personal, fami		lefined in 11 U.S.C. § 101(8)
	you ha	ve?	✓ No. Go	to line 16b.	,	,,	
		,	16b. Are your	debts primarily bu			ots that you incurred to obtain
					ent or through the operat	ion of the busines	as or investment.
				to line 16c. to line 17.			
			16c. State the ty	pe of debts you owe	that are not consumer de	bts or business d	lebts.
17.		u filing under		t filing under Chapter	7 Co to Foo 10	ATTERNATION AND ADDRESS OF THE PARTY OF THE	and an analysis of the second
	Chapte			-			
		i estimate that af empt property is		ng under Chapter 7. I strative expenses are	Do you estimate that after paid that funds will be av	any exempt prop allable to distribut	te to unsecured creditors?
	exclud		₽ No	,	,		
		strative expense	ıs ⊟				
		d that funds will le for distributio					
		ecured creditors					
18.	How m	any creditors do	1-49		1,000-5,000] 25,001-50,000
		timate that you	50-99	Ţ	5,001-10,000		50,001-100,000
	owe?		100-199 200-999	L	10,001-25,000	<u></u>	More than 100,000
	How m	uch do you	\$0-\$50,000	angayat 2500mada wiwakaya ahii 250ad dahaadaa 7 na Eankabaka missi 1995551888000	31,000,001-\$10 million	······································	7\$500,000,001-\$1 billion
13.		te your assets to		o,ooo [\$10,000,001-\$50 million	2000	\$1,000,000,001-\$10 billion
	be wor		\$100,001-\$5		\$50,000,001-\$100 mil		\$10,000,000,001-\$50 billion
			\$500,001-\$1	million [\$100,000,001-\$500 m	illion	More than \$50 billion
20.	How m	uch do you	\$0-\$50,000		\$1,000,001-\$10 million	n [3500,000,001-\$1 billion
	estima	te your liabilities	* ,, +	· · · · · · · · · · · · · · · · · · ·	\$10,000,001-\$50 millio		\$1,000,000,001-\$10 billion
	to be?		\$100,001-\$5		\$50,000,001-\$100 mil		\$10,000,000,001-\$50 billion
			\$500,001-\$1	million L	\$100,000,001-\$500 m	illion L	More than \$50 billion
Pa	rt 7:	Sign Below					
Fo	r you		I have examined correct.	this petition, and I de	eclare under penalty of pe	rjury that the info	ormation provided is true and
				d States Code, I unde			le, under Chapter 7, 11,12, or 13 oter, and I choose to proceed
					I not pay or agree to pay to ead the notice required by		not an attorney to help me fill out (b).
					chapter of title 11, United		
			I understand ma	king a false statemer	nt, concealing property, or ines up to \$250,000, or in	obtaining money	or property by fraud in connection to 20 years, or both.
				2, 1341, 1519, and 3			
			🗶 /s/ William	ı Watson	X	· A	
			Signature of	Debtor 1		Signature of Det	otor 2
			Executed on	11/16/2020		Executed on	
			Executed Off	MM / DD /YYYY	-		M / DD /YYYY

Debtor 1	william wat	son		Case number (if kno	wal
	First Name	Middle Name	Last Name		
	attorney, it	you are	to proceed under Chapter 7, 11, 12 available under each chapter for wi	t, or 13 of title 11, United States Code hich the person is eligible. I also certi	fy that I have delivered to the debtor(s
by an att	e not repres orney, you file this pag	do not	knowledge after an inquiry that the	342(b) and in a case in which § 707(l information in the schedules filed with Date	the petition is incorrect. 11/16/2020
			Signature of Attorney for Debter Douglas Piet		MM / DD /YYYY
			Printed name Pick & Zabicki LLP		
			irm name		
			369 Lexington Avenue Number Street		
			12th Floor		
			New York City	NY	10017
			City	State	ZIP Code
			Contact phone (212) 695-6000) Email address dpick	k@picklaw.net
			1743996	NY	
			Bar number	State	

William Watson

Debtor 1	William Wat	son	,	
	First Name	Middle Name	i, ast Name	neth
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for	rthe: Eastern District of N	lew York	
				Check if this i
Case number	(If known)		· ·	Check if this amended filir

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)	0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$ <u>0.00</u>
1b. Copy line 62, Total personal property, from Schedule A/B	\$ <u>131,670.00</u>
1c. Copy line 63, Total of all property on Schedule A/B	\$ <u>131,670.00</u>
Part 2: Summarize Your Liabilities	
	Your liabilities
	Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$528,376.68
Your total liabilities	\$ <u>528,376.68</u>
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	0.000.00
Copy your combined monthly income from line 12 of Schedule I	\$ <u>6,300.00</u>
5. Schedule J: Your Expenses (Official Form 106J)	0.0/0.00
Copy your monthly expenses from line 22c of Schedule J	\$ <u>2,348.00</u>

De	DIOF I First Name Middle Name Last Name	ase Humber (# known)
P	art 4: Answer These Questions for Administrative and Statistical Records	S
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?	
	☐ No. You have nothing to report on this part of the form. Check this box and submit this	form to the court with your other schedules.
	☑ Yes	
7.	What kind of debt do you have?	nggant i ragandang gamag pangang panganggang palgandan kantal salah dalah dala
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.	n individual primarily for a personal, oses. 28 U.S.C. § 159.
	Your debts are not primarily consumer debts. You have nothing to report on this par	
	this form to the court with your other schedules.	
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly in	ncome from Official
	Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$
9,	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	
		Total claim
	From Part 4 on Schedule E/F, copy the following:	
		0.00
	9a. Domestic support obligations (Copy line 6a.)	\$
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	s
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	s 0.00
	5c. Claims for death of personal righty write you were intoxicated. (Copy line oc.)	•
	9d. Student loans. (Copy line 6f.)	\$
	9e. Obligations arising out of a separation agreement or divorce that you did not report as	0.00
	priority claims. (Copy line 6g.)	\$
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$
		0.00
	9g. Total. Add lines 9a through 9f.	\$

William Watson

Fill in this informa	tion to ident	if your case an	d this filings			
		ny your case an	rais ang.			
Debtor 1	iam Watson _{Name}	Middle Name	Last Name			
Debtor 2 (Spouse, if filing) Fin	st Name	Middle Name	Last Name			
United States Rea	bruntov Cau	rt for the: Easter	n Dietriet of New			
United States Ban York	кгирксу Сои	n ioi ine. Easter	1 DISURCE OF NEW			
Case number						Check if this is an amended filing
(if know)						unerided fishig
Official Form 1						
Schedule /	A/B: Pr	operty				12/15
Part 1: Desc	nown). Ans r ribe Eac r have any l art 2	wer every quest h Residence egal or equitable	ion. , Building, Land	separate sheet to this form. On the	Own or Have an Inte	•
Do you own, lease you own that some 3. Cars, vans, t	e, or have le eone else d	rives. If you leas	interest in any vehi e a vehicle, also repo vehicles, motorcycl	cles, whether they are registered o ort it on Schedule G: Executory Con- es	r not? Include any vehicles tracts and Unexpired Lease	9S.
☐ No ☑ Yes						
3.1 Make:Kia			Who has an	interest in the property? Check one		letera an arrana sa
Model:Spo	rtage	_	Debtor 1	only	the amount of any secur	laims or exemptions. Put ed claims on <i>Schedule D:</i>
Year:		2020	Debtor 2	only and Debtor 2 only		ims Secured by Property:
Approximat Other in	te mileage: nformation:		=	one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
	ee Schedule	e G.	Check if instructions)	this is community property (see	\$ 0.00	\$ 0.00
4. Watercraft, a Examples: Bo P No Yes	ircraft, moto ats, trailers,	or homes, ATVs motors, persona	and other recreation watercraft, fishing ve	nal vehicles, other vehicles, and ac- ssels, snowmobiles, motorcycle acces	cessories ssories	
Add the dolla 5. you have atta	r value of th ched for Pa	ne portion you o art 2. Write that r	wn for all of your en	tries from Part 2, including any ent	ries for pages	> \$0.00
		_				
Part 3: Desc	ribe You	r Personal a	nd Household It	ems		
Do you own or ha	we any lega	l or equitable in	terest in any of the f	ollowing?		Current value of the portion you own?
6. Household g	joods and f	ırnishings				Do not deduct secured claims or exemptions.
Examples:	Major appliar	nces, furniture, lir	ens, china, kitchenwa	ıre		
☐ No ☑ Yes. Des	scribe					
Household (goods and fu	rnishings	***************************************			\$ 100.00

Debtor	1 William Watson Case number(if known	7)
	First Name Middle Name Last Name	
7.	Efectronics	
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	No ✓ Yes. Describe	
	Laptop and television	\$ 100.00
8.	Collectibles of value	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	✓ No Yes. Describe	
9.	Equipment for sports and hobbies	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	□ No ☑ Yes. Describe	
	Digital camera	\$ <u>100.00</u>
10.	Firearms	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	☑ No	
	Yes. Describe	
11.	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	☐ No ✓ Yes. Describe	
	Wardrobe	# F0 00
10		\$ <u>50.00</u>
12.	Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems gold, silver	
	No ✓ Yes. Describe	
	Wedding band	¢ 200 00
4.0		\$ <u>200.00</u>
13.	Non-farm animals Examples: Days, cats, birds, barses	
	Examples: Dogs, cats, birds, horses	
	☐ No ✓ Yes. Describe	
	2 dogs	* 0.00
1 4		\$ <u>0.00</u>
14.	Any other personal and household items you did not already list, including any health aids you did not list	
	✓ No Yes. Give specific information	
45		
15.	Add the dollar value of the portion you own for all of your entries from Part 3, including any entries for pages You have attached for Part 3. Write that number here	> \$550.00
	4: Describe Your Financial Assets	
Part	2. Describe Four Financial Assets	
	ou own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured
16.	Cash	claims or exemptions,
•	Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	
	□No	
	☑ Yes	\$ 20,00

btor	1 William Watson	idie Name L	Last Name					Case	number(if kno	wn)
	Processorie sale	tine lastine	Last Name							
17.	Deposits of money									
	Examples: Checking, and other	savings, or c similar institu	other finan utions. If yo	ncial account ou have mul	ts; certificate Itiple accour	es of depos nts with the	sit; shares in cr same institutio	edit unions, brokera on, list each.	age houses	
	□ No									
	✓ Yes			ution name:	(a.). (b. (m.).	, B				\$ 0.00
	17.1. Checking accou	nt:	Capita	al One Bank (J	Joint) (Restra	uned)				_
	17.2. Checking accou	nt:	Citiba	ank (Joint)						\$ <u>100,00</u>
18.	Bonds, mutual fund	s, or publicly	ly traded s	stocks						
	Examples: Bond fund	s, investmen	nt accounts	s with broker	rage firms, r	money mar	ket accounts			
	☑ No									
40	Yes						1 1	- !		
19.	Non-publicly traded LLC, partnership, ar			n incorpora	ited and un	iincorpora	ted businesse	s, including an im	terest in an	
	No✓ Yes. Give specific	information a	ahout them	n						
	Name of entity:	,,normulates						% of ow	nership:	
	Tennis the Menace Cor	n							%	\$ <u>0.00</u>
	Sanddance Corp.	<u> </u>							%	\$ 0.00
		(Rankrunt)							/~ %	\$ 0.00
	Friends Up North Corp.	(Barikiupi)			***************************************	•		100	——/s %	\$ 0.00
20	Oxojoe Corp. Government and corp.				ble and no	n negotiel	ila inatrumant			Ψ <u>υ.υυ</u>
21.	Yes. Give specific Retirement or pension Examples: Interests in	on accounts	s		(b), thrift sav	vings accou	ints, or other po	ension or profit-sha	ring plans	
	□ No									
	Yes. List each acc	ount separate Institutio	-							
	Type of account									\$ 6,000.00
22	IRA: Security deposits ar	Charles S			····				 .	_ \$ 0,000.00
ZZ,	Your share of all unus Examples: Agreemer	sed deposits	you have							
	☑ No									
~~	☐ Yes		»·					£		
23 .	Annuities (A contract	t τοτ a periodi	aic paymen	nt of money to	o you, eithe	er for life of	iur a number o	n years)		
	☑ No ☐ Yes									
24.	Interests in an educ 26 U.S.C. §§ 530(b)(1				dified ABLE	E program.	, or under a qu	ualified state tuitio	n program.	
	☑ No									
٥-	Yes				.1	45 5 47 -	at to the as			_
25 .	Trusts, equitable or for your benefit	tuture intere	rests in pro	operty (othe	er than any	πning liste	a in line 1), an	a rights or powers	s exercisable	1
	✓ No Yes. Give specif	ic informati	tion about	t them						
26.	Patents, copyrights,				other intell	lectual pro-	perty			
	Examples: Internet do		-			-		nts		
	☑ No									
	Yes Give specific	information a	about them	n						

Debtor	1 William Watson First Name Middle Name Last Name	Case number(if known	Case number(if known)			
	Hrs Name Milde Name Last Name					
27.	Licenses, franchises, and other general intangibles					
	Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses	nses, professional licenses				
	☑ No					
	Yes. Give specific information about them					
Mone	y or property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.			
28.	Tax refunds owed to you					
	□ No	1.1				
	Yes. Give specific information about them, including whether you already filed the returns					
	IRS 2019 (Joint), NYS 2019 (Joint)	Federal: State:	\$ <u>Unknown</u> \$ Unknown			
		Local:	\$ <u>0.00</u>			
29	Family support					
20,	Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divo	rce settlement, property settlement				
	☑ No					
	Yes. Give specific information					
30.	Other amounts someone owes you					
	Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation Social Security benefits; unpaid loans you made to someone else	n pay, workers' compensation,				
	☑ No					
	Yes. Give specific information					
31.	Interests in insurance policies					
	✓ No ✓ Yes. Name the insurance company of each policy and list its value					
32.	Any interest in property that is due you from someone who has died					
	☑ No					
	Yes. Give specific information					
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand	l for payment				
	☑ No					
0.4	Yes. Give specific information					
34.	Other contingent and unliquidated claims of every nature, including counterclaims of t claims	he debtor and rights to set off				
	✓ No ✓ Yes. Give specific information					
35.	Any financial assets you did not already list					
	☑ No					
	Yes. Give specific information					
	dd the dollar value of the portion you own for all of your entries from Part 4, including a ou have attached for Part 4. Write that number here		> \$6,120.00			
Part	5: Describe Any Business-Related Property You Own or Have an I	Interest in. List anv real e	state in Part 1.			
J1.	Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6.					
	Yes. Go to line 38.					
	Describe Any Farm- and Commercial Fishing-Related Property	You Own or Have an Inte	rest In.			
Part	6: If you own or have an interest in farmland, list it in Part 1.	······································				
46.	Do you own or have any legal or equitable interest in any business-related property?					
	✓ No. Go to Part 7.					
	Yes. Go to line 47.					

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

ebtor 1 William Watson First Name Middle Name Last Name		Case number(if known)_	
53. Do you have other property of any kind you did not already list?			
Examples: Season tickets, country club membership			
□ No			
Yes. Give specific			
information			
Claim for 50% of coop interest in apartment owned with wife			
4. Add the dollar value of all of your entries from Part 7. Write that n	umber here	>	\$125,000
			T
art 8: List the Totals of Each Part of this Form			
55. Part 1: Total real estate, line 2			
			\$0.00
50. Part 2: Total vehicles, line 5	\$ <u>0.00</u>		\$0.00
•	\$ <u>0.00 </u>		\$0.00
57. Part 3: Total personal and household items, line 15			\$0.00
57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36	\$ 550.00		\$0.00
57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 59. Part 5: Total business-related property, line 45	\$ <u>550.00</u> \$ <u>6,120.00</u>		\$ 0.00
56. Part 2: Total vehicles, line 5 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 59. Part 5: Total business-related property, line 45 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54	\$ <u>550.00</u> \$ <u>6,120.00</u> \$ <u>0.00</u>		\$0.00
57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 59. Part 5: Total business-related property, line 45 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54	\$ 550.00 \$ 6,120.00 \$ 0.00 \$ 125,000.00	y personal property total≯	\$0.00
57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 59. Part 5: Total business-related property, line 45	\$ 550.00 \$ 6,120.00 \$ 0.00 \$ 0.00 + \$ 125,000.00	personal property total➤	

Fill in this information to identify your case:			
William Watson			
Debtor 1 First Name Middle Name	Last Name		
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Eastern District	of New York		,
Case number	ç - ·-	,	☐ Check if this is an
(If known)			amended filing
Official Form 106C			
Schedule C: The Prop	erty You C	laim as Exempt	4/19
Be as complete and accurate as possible. If two ma Using the property you listed on <i>Schedule A/B: Prop</i> space is needed, fill out and attach to this page as n your name and case number (if known).	perty (Official Form 106A/E	3) as your source, list the property that	you claim as exempt. If more
For each item of property you claim as exempt, specific dollar amount as exempt. Alternatively, of any applicable statutory limit. Some exemption retirement funds—may be unlimited in dollar amount would be limited to the applicable statutory amount and the statutory amount of the statutory amo	you may claim the full fa ns—such as those for h lount. However, if you cla nt and the value of the pr nunt.	iir market value of the property bein ealth aids, rights to receive certain I aim an exemption of 100% of fair ma	g exempted up to the amount penefits, and tax-exempt arket value under a law that
Part 1: Identify the Property You Claim	as Exempt		
1. Which set of exemptions are you claiming?	Check one only, even if ve	our spouse is filina with you.	
You are claiming state and federal nonbani			
☐ You are claiming federal exemptions. 11 U			
2. For any property you list on Schedule A/B th	hat you claim as exempt,	fill in the information below.	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Household goods - Household goods and Brief furnishings	100.00		NY CPLR § 5205
description:	\$ <u>100.00</u>	✓ \$ 100.00 100% of fair market value, up to	
Line from		any applicable statutory limit	
Schedule A/B: 6 Electronics - Laptop and television			NY CPLR § 5205
Brief description:	\$ <u>100.00</u>	□ \$ 100.00	
Line from		100% of fair market value, up to any applicable statutory limit	
Schedule A/B: 7 Sports and hobby equipment - Digital came	ra		NY CPLR § 5205
Brief description:	\$_100.00	☑ § 100.00	
Line from		100% of fair market value, up to any applicable statutory limit	ı
Schedule A/B: 9			
3. Are you claiming a homestead exemption o (Subject to adjustment on 4/01/22 and every 3		iled on or after the date of adjustment.)
☑ No	•	·	
Yes. Did you acquire the property covered No	by the exemption within 1,	215 days before you filed this case?	
☐ Yes			

Debtor

<i>N</i> illiam	Watson	
ert Ninene	Middle Nome	Leet Name

Case number (i	f known)	
Case Hullipel (1 KHUWIII	

Part 2:	Additional	Рa

	lescription of the property and line	Current value of the	Amount of the exemption you claim	Specific laws that allow exemption
		portion you own Copy the value from Schedule A/B	Check only one box	
	Clothing - Wardrobe	Ochedole AD	for each exemption	NY CPLR § 5205(a)(5)
Brief description:		\$ <u>50.00</u>	5 50.00	
Line from Schedule A			100% of fair market value, up to any applicable statutory limit)
Brief description:	Jewelry - Wedding band	\$ <u>200.00</u>	\$ 200.00 100% of fair market value, up to	NY CPLR § 5205
Line from Schedule A	B: 12		any applicable statutory limit	
Brief description:	Charles Schwab	\$ <u>6,000.00</u>	\$ 6,000.00 100% of fair market value, up to	N.Y. CPLR § 5205 (c) N.Y. Debt. & Cred. Law § 282 (2)(e)
Line from Schedule A	B; 21 IRS 2019 (Joint) (owed to debtor)		any applicable statutory limit	N.Y. Debt. & Cred. Law § 283 (2)
Brief description:	2010 (03.11), (0100 to 00010),	\$Unknown	\$ 2,850.00 100% of fair market value, up to	
Line from Schedule A	B; 28 NYS 2019 (Joint) (owed to debtor)		any applicable statutory limit	N.Y. Debt. & Cred. Law § 283 (2)
Brief description:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$ <u>Unknown</u>	\$ 2,850.00 100% of fair market value, up to	* '
Line from Schedule A			any applicable statutory limit	
	Claim for 50% of coop interest in apartment owned with wife (Not Yet Listed)	\$ <u>125,000.00</u>	\$ 125,000.00	N.Y. CPLR § 5206 (a)
Line from Schedule A	<i>B</i> : 53		100% of fair market value, up to any applicable statutory limit	,
Brief description:		\$	Д\$	
Line from Schedule A	ß:		100% of fair market value, up to any applicable statutory limit)
Brief description:		\$	\$ \$ 100% of fair market value, up to	>
Line from Schedule A	B:		any applicable statutory limit	
Brief description:		\$	\$100% of fair market value, up to)
Line from Schedule A	B:		any applicable statutory limit	
Brief description:		\$	\$100% of fair market value, up to	
Line from Schedule A	B:		any applicable statutory limit	,
Brief description:		\$	\$ 100% of fair market value, up to any applicable statutory limit	.
Line from Schedule A	B:		ану аррисаме Statutory или	
Brief description:		\$	\$\$	3
Line from Schedule A	B:		any applicable statutory limit	

Fill in this info	rmation to identify	your case:					
	William Watson						
Debtor 1	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court fo	r the: Eastern Distric	t of New York				
Case number							Check if this is an
(if know)							amended filing
Be as compl more space name and ca	e D: Cred ete and accurat is needed, copy ise number (if k	e as possible. If t the Additional P nown).	wo married people ar age, fill it out, numbe	e filing together, both are equar the entries, and attach it to the	lly responsible for s	supplying correct in	nformation. If ages, write your
		ecured by your pro	•	es. You have nothing else to report on t	this form		
	all of the informati		on that you other seriedan	to have nothing due to report our			
Part 1: Li	st All Secured (Claims					
more than or	ne creditor has a pa			creditor separately for each claim. If is much as possible, list the claims in	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
Δ	dd the dollar valu	e of your entries in	Column A on this page. \	Write that number here:			

Part 2

List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this information to identify your case:		
Debtor 1 William Watson	Alaman and a second a second and a second an	
First Name Middle Name Last Na	varne	
Debtor 2 (Spouse, if filing) First Name Middle Name Last	st Name	
United States Bankruptcy Court for the: Eastern District of New Yo	York	
Case number (if know)		Check if this is an amended filing
Official Form 106E/F		
Schedule E/F: Creditors Who Ha	ave Unsecured Claims	12/15
contracts or unexpired leases that could result in a claim. Also and Unexpired Leases (Official Form 106G). Do not include any		Executory Contracts is Secured by
Do any creditors have priority unsecured claims against you		
No. Go to Part 2.	м:	
Yes.		
Part 2: List All of Your NONPRIORITY Unsecured 0	Claims	
creditor separately for each claim. For each claim listed, identify	· ·	
71	Last 4 digits of account number	. 450 000 00
4.1 Focus 15 LLC	- When was the debt incurred?	\$ 150,000.00
Nonpriority Creditor's Name c/o Downing & Peck P.C.	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
17 Battery Place, Suite 324	Unliquidated	
	☑ Disputed	
New York NJ 10004	Type of NONPRIORITY unsecured claim:	
City State ZIP Code	Student loans	
Who owes the debt? Check one. Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify Guaranty of Corporate Loans	
Check if this claim relates to a community debt		
Is the claim subject to offset?		
☑ No ☐ Yes		

Debto	William Watson	Case number(if known)	
	First Name Middle Name Last Name		
4.5		Last 4 digits of account number	* 000 000 00
4.2	Golden Focus, LLC	When was the debt incurred?	\$ 368,969.00
	Nonpriority Creditor's Name	As of the date you file, the claim is: Check all that apply.	
	c/o Downing & Peck P.C. Number Street	Contingent	
	17 Battery Place, Suite 324	Unliquidated	
		☑ Disputed	
	New York NJ 10004	O Disputed	:
	City State ZIP Code	Type of NONPRIORITY unsecured claim:	
	Who owes the debt? Check one.	Student loans	
	Debtor 1 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Debtor 2 only	Debts to pension or profit-sharing plans, and other similar	
	Debtor 1 and Debtor 2 only	debts	
	At least one of the debtors and another	Other. Specify Guaranty of Corporate Loans	
	Check if this claim relates to a community debt		
	Is the claim subject to offset?		
	No		
	Yes		
4.2		Last 4 digits of account number	o 65 10
4.3	Gotham Gastroenterology	When was the debt incurred?	\$ <u>65.18</u>
	Nonpriority Creditor's Name	As of the date you file, the claim is: Check all that apply.	
	535 5th Avenue Number Street	Contingent	:
	Suite 604	Unliquidated	
		Disputed	
	New York NY 10017		
	City State ZIP Code	Type of NONPRIORITY unsecured claim:	
	Who owes the debt? Check one.	Student loans	
	Debtor 1 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Debtor 2 only	Debts to pension or profit-sharing plans, and other similar	
	Debtor 1 and Debtor 2 only	debts Other. Specify Medical Services	
	At least one of the debtors and another	Other, Specify Medical Services	
	Check if this claim relates to a community debt		
	is the claim subject to offset?		
	☑ No		
	Yes		
4.4	Mt. Sinai Beth Israel	Last 4 digits of account number	\$ 1,947.41
	Nonpriority Creditor's Name	When was the debt incurred?	
	116 Lukens Drive	As of the date you file, the claim is: Check all that apply.	
	Number Street	Contingent	
	Riveredge Park	☐ Unliquidated	ļ
		Disputed	
	New Castle DE 19720	Type of NONPRIORITY unsecured claim:	
	City State ZIP Code	Student loans	
	Who owes the debt? Check one. Debtor 1 only	Obligations arising out of a separation agreement or divorce	
	Debtor 2 only	that you did not report as priority claims	
	Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
	At least one of the debtors and another	Other. Specify Medical Services	
	Check if this claim relates to a community		:
	debt		
	Is the claim subject to offset? No		
	Yes		:
			:

Case 1-20-44008-nhl Doc 1 Filed 11/16/20 Entered 11/16/20 15:27:04 William Watson Case number(if known) Last 4 digits of account number \$ 7,395.09 New York Pain Care When was the debt incurred? . Nonpriority Creditor's Name 41 5th Avenue As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Disputed New York NY 10003 Type of NONPRIORITY unsecured claim: State ZIP Code Student loans Who owes the debt? Check one. Obligations arising out of a separation agreement or divorce Debtor 1 only that you did not report as priority claims Debtor 2 only Debts to pension or profit-sharing plans, and other similar Debtor 1 and Debtor 2 only Other. Specify Medical Services At least one of the debtors and another Check if this claim relates to a community Is the claim subject to offset? List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims, This information is for statistical reporting purposes only, 28 U.S.C. § 159. Add the amounts for each type of unsecured claim. Total claim 6a. Domestic support obligations \$ 0.00 6b. Taxes and certain other debts you owe the government 6b. \$ 0.00 6c. Claims for death or personal injury while you were \$ 0.00 6d. Other. Add all other priority unsecured claims. Write that 6d. \$ 0.00 amount here. 6e, \$ 0.00

6e. Total. Add lines 6a through 6d. Total claim Total claims 6f. Student loans \$ 0.00 from Part 2 6g. Obligations arising out of a separation agreement or \$ 0.00

divorce that you did not report as priority claims

6h. Debts to pension or profit-sharing plans, and other similar

6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

6j. Total. Add lines 6f through 6i.

\$ 0.00

6i \$ 528,376.68

\$ 528,376.68

Debtor

4.5

#1A8

City

debt

☑ No ☐ Yes

Part 3:

Part 4:

Total claims

from Part 1

Fill in	this information to identify your case:	
Debte	or 1 William Watson	
	First Name Middle Name Last Name	
Debto (Spot	or 2 USE, if filling) First Name Middle Name Last Name	
Unite	d States Bankruptcy Court for the: Eastern District of New York	
	number	☐ Check if this is an
(if kno	Ow)	amended filing
Offici	ial Form 106G	
Sch	edule G: Executory Contracts and U	nexpired Leases 12/15
Be as	complete and accurate as possible. If two married people are fil	ling together, both are equally responsible for supplying correct
inform	nation. If more space is needed, copy the additional page, fill it o	out, number the entries, and attach it to this page. On the top of any
additie	onal pages, write your name and case number (if known).	
1 Da	you have any executory contracts or unexpired leases?	
	No. Check this box and file this form with the court with your other so	chedules. You have nothing else to report on this form.
	Yes. Fill in all of the information below even if the contracts or leases	
		, ,,
		contract or lease. Then state what each contract or lease is for (for
	ample, rent, vehicle lease, cell phone). See the instructions for the discount of the discou	is form in the instruction booklet for more examples of executory contracts
F	Person or company with whom you have the contract or lease	State what the contract or lease is for
 -1	, ,	A 40 Long
2.1	Hyundai Capital America	Auto Lease
	Name	
	Attn: Legal Dept. 3161 Michelson Dr., 19th Fl.	
	Street	
	Irvine CA 92612	
	City State ZIP Code	
2.2	Dubiis Clauses	Storage Unit Lease Lessee
	Public Storage Name	
	4102 Northern Boulevard	
	Street	
	Long Island	
	City	
	Číty NY 11101	
	State ZIP Code	

Fill in	this information to identif	y your case:		
	. William Watso	on .		
Debto	First Name	Middle Name	Last Name	
Debto (Spou	r 2 se, if filing) First Name	Middle Name	Last Name	
United	i States Bankruptcy Court fo	or the: Eastern Distric	t of New York	
Case	number			☐ Check if this is an
(ìf kno	w)			amended filing
Offici	al Form 106H			
	edule H: You	r Codebto	rs	12/15
filing to the end known	ogether, both are equa tries in the boxes on th). Answer every quest	ally responsible for the left. Attach the ion.	or supplying correct i Additional Page to th	you may have. Be as complete and accurate as possible. If two married people are information. If more space is needed, copy the Additional Page, fill it out, and number his page. On the top of any Additional Pages, write your name and case number (if it it it is either spouse as a codebtor.)
	No		-	
	Yes	hava van livad in	a community propert	ty state or territory? (Community property states and territories include Arizona,
				exas, Washington, and Wisconsin.)
_	No. Go to line 3.			
_	Yes. Did your spouse,	• •	· ·	th you at the time? ouse as a codebtor if your spouse is filing with you. List the person shown in line 2
a	gain as a codebtor onl	y if that person is	a guarantor or cosig chedule G (Official Fo	ner. Make sure you have listed the creditor on Schedule D (Official Form 106D), orm 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.
	Column 1: Your codel:	otor	+ 7 i	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1	Friends Up North Corp).		Schedule D, line
	Name			Schedule E/F, line 4.1
	48-10 43rd Street Street			Schedule G, line
	Woodside NY 1137	77		
	City State ZIP C	Code		
3.2	Vincent Oshin			Schedule D, line
	Name	***************************************		Schedule E/F, line 4.1
	Unknown			Schedule G, line
	Street			
	City State ZIP Code			201124A-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
3.3	•	•		Schedule D, line
	Eva Xia Name			Schedule E/F, line 4.1
	48-10 43rd Street			Schedule G. line
	Street		······································	
	Woodside NY 1137	77		
	City State ZIP C	Code		
3.4	Death to Tennis Corp.		***************************************	Schedule D, line
	Name			Schedule E/F, line 4.1
	48-10 43rd Street Street			Schedule G, line
	Woodside NY 113	77		
	City State ZIP C	Code		

page 1 of 2

Debte	or William Watson First Name Middle Name Last Name	Case number(if known)
3.5	Friends Up North Corp.	☐ Schedule D, line ☐ Schedule E/F, line 4.2 ☐ Schedule G, line ☐ Sche
	Street Woodside NY 11377	
3.6	City State ZIP Code Vincent Oshin Name Unknown Street	☐ Schedule D, line ☑ Schedule E/F, line 4.2 ☐ Schedule G, line
3.7	City State ZIP Code Eva Xia Name 48-10 43rd Street	☐ Schedule D, line ☐ Schedule E/F, line 4.2 ☐ Schedule G, line ☐ Schedule G, line ☐ Schedule G.
3.8	Street Woodside NY 11377 City State ZIP Code Death to Tennis Corp. Name 48-10 43rd Street Street Woodside NY 11377	☐ Schedule D, line ☑ Schedule E/F, line 4.2 ☐ Schedule G, line
	City State ZIP Code	

Fill in this information to identify	your case:					
William Watson						
Debtor 1 First Name	Middle Name	Last Name		_		
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:	Eastern District of New Yo	ork				
Case number (If known)		,		Check if	this is:	
(II Alberty				Pressi	mended filing	
					oplement showing post ne as of the following d	-
Official Form 106I				MM /	DD / YYYY	
Schedule I: You	ır Income					12/15
Be as complete and accurate as posupplying correct information. If you from the separate sheet to this form. On the Part 1: Describe Employm	ou are married and not fili use is not filing with you, a top of any additional pag	ing jointly, and yo do not include int	ur sp orma	ouse is living with tion about your sp	you, include information ouse. If more space is n	n about your spouse. eeded, attach a
1. Fill in your employment						
information.		Debtor 1		eessa saanan kanan ka anan ka ya ka	Debtor 2 or non-fi	ling spouse
If you have more than one job, attach a separate page with	P	D contained			☑ Employed	
information about additional employers.	Employment status	☐ Employed ☐ Not employ	ed		Not employed	
Include part-time, seasonal, or						
self-employed work.	Occupation				Designer	
Occupation may include student or homemaker, if it applies.					Ralph Lauren C	orp.
	Employer's name	w			· -	:
	Employer's address				100 Metro Boul	evard
		Number Street			Number Street	

					Nutley, NJ 0711	10
		City	Stat	e ZIP Code	City	State ZIP Code
	How long employed the	re?			5 Years	
Part 2: Give Details About	Monthly Income					
Estimate monthly income as of spouse unless you are separated If you or your non-filing spouse he below. If you need more space, a	ave more than one employe	er, combine the info				
below. If you need more space, a	mach a separate sheet to the	iio form.		For Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, sal deductions). If not paid monthly,			2.	\$0.00	\$8,730.00	
3. Estimate and list monthly over	rtime pay.		3.	+\$0.00	+ \$0.00	
4. Calculate gross income. Add li	ne 2 + line 3.		4.	\$0.00	\$ 8,730.00	
				L	L	

Debtor 1	VVIIIIAM VVATSON First Name Middle Name Last Name		Cas	e number (if kno	wn)			
			For I	Debtor 1		Debtor 2 or filing spouse		
Cor	by line 4 here	→ 4.	\$	0.00	\$	8,730.00		
	all payroll deductions:				_			
5a	. Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$_	0.00		
5b	Mandatory contributions for retirement plans	5b.	\$	0.00	\$_	0.00		
5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$_	0.00		
. 5d	Required repayments of retirement fund loans	5d.	\$	0.00	\$_	0.00		
5e.	Insurance	5e.	\$	0.00	\$_	0.00		
5f.	Domestic support obligations	5f.	\$	0.00	\$_	0.00		
5a	. Union dues	5g.	\$	0.00	\$_	0.00		
5h	Other deductions. Specify: Payroll Deductions	5h.	+\$	0.00	+ s	2,430.00		
:			\$		\$			
			\$		\$_			
:			\$		\$_			
6. Ad	d the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$	0.00	\$	2,430.00		
7. Ca	Iculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$_	6,300.00		
8. List	t all other income regularly received:							
8a.	Net income from rental property and from operating a business, profession, or farm							
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$_	0.00		
8b	. Interest and dividends	8b.	\$	0.00	\$	0.00		
8c.	Family support payments that you, a non-filing spouse, or a dependence regularly receive	ent						
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00		
	Unemployment compensation	8d.	\$	0.00	\$_	0.00		
8e	. Social Security	8e.	\$	0.00	\$_	0.00		
8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		¢	0.00	\$	0.00		
	Specify:	8f.	Ψ		Ψ	0.00		
8g	. Pension or retirement income	8g.	\$	0.00	\$_	0.00		
8h	. Other monthly income. Specify:	8h.	+\$	0.00	+\$_	0.00	_	
9. Ad	d all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	0.00	\$_	0.00		
	culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	0.00		6,300.00	= \$_	6,300.00
Incl	te all other regular contributions to the expenses that you list in Scheoude contributions from an unmarried partner, members of your household, ands or relatives.			ts, your room	mates, a	and other		
	not include any amounts already included in lines 2-10 or amounts that are ecify:			o pay expens	es listed	in Schedule J. 11.	+ \$	0.00
•	d the amount in the last column of line 10 to the amount in line 11. The			ombined mor	 ithly inco		Г	
	te that amount on the Summary of Your Assets and Liabilities and Certain				•	12.		6,300.00
<u> </u>	you expect an increase or decrease within the year after you file this No. Yes. Explain:	form?	•				6116	onthly income

William Watson

7					
Fill in this information	to identify your case:				
Debtor 1 William Wa	atson Middle Name	Last Name	Check if this is:		
Debtor 2			An amended	filina	
(Spouse, if filing) First Name	Middle Name	Last Name			petition chapter 13
United States Bankruptcy C	ourt for the: Eastern District of New York	(State)		of the following	
Case number			MM / DD / YYY	Ý	
(If known)					
Official Form 1	06J				
Schedule J	J: Your Expense	es			12/15
	urate as possible. If two married p ce is needed, attach another sheel y question.				
Part 1: Describe	Your Household				
1. Is this a joint case?					
No. Go to line 2.					
	2 live in a separate household?				
No					
Yes. Debto	or 2 must file Official Form 106J-2, Ex	penses for Separate House	ehold of Debtor 2.		
2. Do you have depende	nts?	Denendent's	relationship to	Dependent's	Does dependent live
Do not list Debtor 1 and		ormation for Debtor 1 or D		age	with you?
Debtor 2.	each dependent	beautistication to the control of th	en de la martina de la mar	England Conference of Conference on Security	No
Do not state the depend names.	uents		· · · · · · · · · · · · · · · · · · ·		Yes
				PARAMETER AND ADDRESS OF THE PARAMETER AND AD	L_No
					Yes
		 		***************************************	No Yes
					No
				***************************************	Yes
					\Box_{No}
				····	Yes
3. Do your expenses inci	lude V				
expenses of people of	ther than				
yourself and your dep	endents? — 100				
Part 2: Estimate Yo	our Ongoing Monthly Expense:	3			
Estimate your expenses	as of your bankruptcy filing date (inless you are using this	form as a supplement in	a Chapter 13 c	ase to report
•	ter the bankruptcy is filed. If this is	a supplemental Schedul	e J, check the box at the	top of the form	and fill in the
applicable date.		stanas iš vais kaassi škaisas	hin af		
	or with non-cash government assisted in the contract of the co			Your expe	ises
	wnership expenses for your reside	•		mmirdesvárjaríkannáscencedendesvárvantum	0.00
any rent for the ground	• • •	J-3-	4.	\$	0.00
If not included in line	4 :				0.00
4a. Real estate taxes	S		4 a.	\$	0.00
4b. Property, homeov	wner's, or renter's insurance		4b.	\$	0.00
4c. Home maintenan	nce, repair, and upkeep expenses		4 c.	\$	100.00
4d. Homeowner's as	sociation or condominium dues		4d.	\$	400.00

Official Form 106J

Debtor 1

William Watson
First Name Middle Name Last Name

Case number (if known)

			Your ex	penses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
-	6a. Electricity, heat, natural gas	6a.	\$	0.00
	6b. Water, sewer, garbage collection	6b.	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	320.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	400.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	20.00
10.	Personal care products and services	10.	\$	20.00
11.	Medical and dental expenses	11.	\$	100.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	150.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	125.00
	15d. Other insurance. Specify: Health insurance	15d.	\$	250.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	309.00
	17b. Car payments for Vehicle 2	17b.	\$	154.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	1e.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

Debtor 1	William Watson Case number (i	knowni		
	First Name Middle Name Last Name			
21. Other. S	pecify:	21.	+\$ +\$	0.00
 		-	+\$	
2. Calculat	te your monthly expenses.			
22a. Add	lines 4 through 21.	22a.	\$	2,348.00
22b. Cop	y line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a	22b.	\$	
and 22b.	The result is your monthly expenses.	22 c.	\$	2,348.00
3. Calculate	your monthly net income.		•	6,300.00
23a. Cop	y line 12 (your combined monthly income) from Schedule I.	23a.	\$	0,000.00
23b. Cop	y your monthly expenses from line 22c above.	23b.	\$	2,348.00
	stract your monthly expenses from your monthly income. result is your monthly net income.	23 c.	\$	3,952.00
4. Do you ex	spect an increase or decrease in your expenses within the year after you file this form?			
-	ole, do you expect to finish paying for your car loan within the year or do you expect your payment to increase or decrease because of a modification to the terms of your mortgage?			
No.				
✓ No.				

Il in this information to identify y	our case:				
ebtor 1 William Watson	M. Material Company	Lasi Name			
ebtor 2	Middle Name	Last Name			
pouse, if filing) First Name	Middle Name	Last Name			
ited States Bankruptcy Court for the Ea	astern District of New Y	′ork			
se number known)					
					neck if this is nended filing
Official Form 106De		dividual D	ahtar's Sch	adulae	12/15
f two married people are filing to	ogether, both are equa	ally responsible for sup	plying correct information.		
	1341, 1519, and 3571.				
Sign Below Did you pay or agree to pay s					
Sign Below Did you pay or agree to pay s		an attorney to help you	fill out bankruptcy forms?		
Sign Below Did you pay or agree to pay s		an attorney to help you			
Sign Below Did you pay or agree to pay s		an attorney to help you	fill out bankruptcy forms?		
Sign Below Did you pay or agree to pay s	someone who is NOT a	an attorney to help you	fill out bankruptcy forms? . Attach Bankruptcy Petition Prep. Signature (Official Form 119).	parer's Notice, Declaration, a	
Sign Below Did you pay or agree to pay s No Yes. Name of person Under penalty of perjury, I de	someone who is NOT a	an attorney to help you	fill out bankruptcy forms? . Attach Bankruptcy Petition Prep. Signature (Official Form 119).	parer's Notice, Declaration, a	
Did you pay or agree to pay s No Yes. Name of person Under penalty of perjury, I de that they are true and correct	someone who is NOT a	an attorney to help you	fili out bankruptcy forms? Attach Bankruptcy Petition Prepaignature (Official Form 119).	parer's Notice, Declaration, a	
Sign Below Did you pay or agree to pay s No Yes. Name of person Under penalty of perjury, I de that they are true and correct	someone who is NOT a	an attorney to help you the summary and sche	fili out bankruptcy forms? Attach Bankruptcy Petition Prepaignature (Official Form 119).	parer's Notice, Declaration, a	

William Watson			
First Name Middle Name	Last Name		
ouse, if filing) First Name Middle Name	Last Name		•
ted States Bankruptcy Court for the: Eastern District of N	New York		
se number			Поставления
(nown)			☐ Check if this is a amended filing
ficial Form 107			
	aire for Indiv	iduale Filing for Bankrur	tov m
atement of Financial Affa			
rt 1: Give Details About Your Marital S	itatus and Where Yo	ou Lived Before	
What is your current marital status?			
What is your current marital status? ☑ Married			
•			
✓ Married Not married	ere other than where v	ou live now?	
Married	ere other than where yo	ou live now?	
✓ Married ☐ Not married During the last 3 years, have you lived anywhe			
✓ Married ☐ Not married During the last 3 years, have you lived anywher			Dates Debtor 2 lived there
✓ Married ☐ Not married During the last 3 years, have you lived anywher ✓ No ☐ Yes. List all of the places you lived in the last	3 years. Do not include Dates Debtor 1	where you live now.	
✓ Married ☐ Not married During the last 3 years, have you lived anywher ✓ No ☐ Yes. List all of the places you lived in the last	3 years. Do not include Dates Debtor 1	where you live now. Debtor 2:	lived there
✓ Married ☐ Not married During the last 3 years, have you lived anywher ✓ No ☐ Yes. List all of the places you lived in the last	3 years. Do not include Dates Debtor 1 lived there	where you live now. Debtor 2:	lived there Same as Debtor
✓ Married Not married During the last 3 years, have you lived anywher No Yes. List all of the places you lived in the last Debtor 1:	3 years. Do not include Dates Debtor 1 lived there From	where you live now. Debtor 2: Same as Debtor 1	lived there Same as Debtor From
✓ Married Not married During the last 3 years, have you lived anywher No Yes. List all of the places you lived in the last Debtor 1: Number Street	3 years. Do not include Dates Debtor 1 lived there From	where you live now. Debtor 2: Same as Debtor 1	lived there Same as Debtor From
✓ Married Not married During the last 3 years, have you lived anywhe ✓ No Yes. List all of the places you lived in the last Debtor 1: Number Street	3 years. Do not include Dates Debtor 1 lived there From	where you live now. Debtor 2: Same as Debtor 1 Number Street City State ZIP Code	lived there Same as Debtor From To
✓ Married Not married During the last 3 years, have you lived anywher No Yes. List all of the places you lived in the last Debtor 1: Number Street	3 years. Do not include Dates Debtor 1 lived there From To	where you live now. Debtor 2: Same as Debtor 1 Number Street	lived there Same as Debtor From To Same as Debtor
✓ Married Not married During the last 3 years, have you lived anywher No Yes. List all of the places you lived in the last Debtor 1: Number Street	3 years. Do not include Dates Debtor 1 lived there From To From From	where you live now. Debtor 2: Same as Debtor 1 Number Street City State ZIP Code	lived there Same as Debtor From To Same as Debtor From From From From
✓ Married Not married During the last 3 years, have you lived anywher No Yes. List all of the places you lived in the last Debtor 1: Number Street City State ZIP Code	3 years. Do not include Dates Debtor 1 lived there From To	where you live now. Debtor 2: Same as Debtor 1 Number Street City State ZIP Code	lived there Same as Debtor From To Same as Debtor
✓ Married Not married During the last 3 years, have you lived anywher No Yes. List all of the places you lived in the last Debtor 1: Number Street City State ZIP Code	3 years. Do not include Dates Debtor 1 lived there From To From From	where you live now. Debtor 2: Same as Debtor 1 Number Street City State ZIP Code	lived there Same as Debtor From To Same as Debtor From To To To To

Debtor 1	William Watson				Case	e number (if known)	
	First Name Middle N						
Part 2:	Explain the Source	es of Your Inco	ome				***************************************
Fill in the	he total amount of inc are filing a joint case a	ome you received	from all jobs and	all busin	esses, including par		alendar years?
☐ No ☑ Yes	s. Fill in the details.						
E 16:	s. Fill fil the details.	ž.					
			Debtor 1			Debtor 2	
			Sources of income Check all that app		Gross income (before deductions an exclusions)	Sources of income check all that apply.	Gross income (before deductions and exclusions)
	om January 1 of cur e date you filed for b		Wages, complete bonuses, tips Operating a limit		\$ 0.00	Wages, commission bonuses, tips Operating a busines	\$
Fo	or last calendar year	:	Wages, comr	missions,	\$0.00	Wages, commission bonuses, tips	
(J	anuary 1 to Decembe	r 31, <u>2019</u>)	Operating a t		\$ <u>0.00</u>	Operating a busines	φ
	or the calendar year		Wages, comr bonuses, tips Operating a t		\$ <u>0.00</u>	☐ Wages, commission bonuses, tips ☐ Operating a busines	\$
and oth winning List ead	ner public benefit payr gs. If you are filing a jo ch source and the gro	ments; pensions; re pint case and you h less income from ea	ental income; into nave income that	erest; divi you rece	dends; money collectived together, list it of	cted from lawsuits; royalties only once under Debtor 1. that you listed in line 4.	ial Security, unemployment, s; and gambling and lottery
		Debtor 1					
		Sources of Describe I	and the second second	each sou	eductions and	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	uary 1 of current the date you inkruptcy:	Federal Stimulus		\$ <u>1,200.0</u> \$			\$\$
				\$			<u> </u>
For last cal	lendar year:			\$			<u> </u>
(January 1 t				\$ \$	***************************************		\$
December 3) i, <u></u>)						
For the cal	endar year			\$			\$
before that	::			\$			<u> </u>
(January 1 t				\$			\$
December 3	31, <u>2018</u>)						

Debtor 1	William Watson		Case	number (if known)	
	First Name Middle Name Last Nan	ne		· · · · · · · · · · · · · · · · · · ·	
	!				
Part 3:	List Certain Payments You Made	Before You Filed	for Bankruptcy		
6. Are ei	ther Debtor 1's or Debtor 2's debts prim	arily consumer deb	ts?		
☑ No	o. Neither Debtor 1 nor Debtor 2 has pr "incurred by an individual primarily for a			re defined in 11 U.S.C. § 101	(8) as
	During the 90 days before you filed for	bankruptcy, did you p	ay any creditor a total of	f \$6,825* or more?	
	No. Go to line 7.				
	Yes. List below each creditor to who the total amount you paid that creas child support and alimony. Also	ditor. Do not include p	ayments for domestic s	upport obligations, such	
	* Subject to adjustment on 4/01/22 and		•		
☐ Ye	s. Debtor 1 or Debtor 2 or both have pri	imarily consumer de	bts.		
	During the 90 days before you filed for			\$600 or more?	
	No. Go to line 7.				
			\$000 d th - A-		
	Yes. List below each creditor to who creditor. Do not include payme	ents for domestic supp	ort obligations, such as	child support and	
	alimony. Also, do not include p	payments to an attorne	ey for this bankruptcy ca	se.	
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for
			e.	œ.	_
	Creditor's Name		\$	<u> </u>	☐ Mortgage
					Car
	Number Street				Credit card
					Loan repayment Suppliers or vendors
	City State ZIF	Code			Other
			\$	<u> </u>	Mortgage
	Creditor's Name				☐ Car
	Number Street				Credit card
	Names Sies.				Loan repayment
					Suppliers or vendors
	City State ZiP	Code			☐ Other
	•	Code			
	A contract of the contract of			•	er e e
	Creditor's Name		\$	\$	Mortgage
	Preditor 2 Harrie				☐ Car
	Number Street				Credit card
					Loan repayment
	CIPTOP TVO				Suppliers or vendors
	City State ZIP	Code			Other
	5.1, 5tate 21r				

				Case number (if known)	
	First Name Middle Name Last Name				
<i>nsider:</i> corpora agent, i	1 year before you filed for bankruptcy, did y is include your relatives; any general partners; rations of which you are an officer, director, persincluding one for a business you operate as a selected support and alimony.	elatives of any o	general partners; p owner of 20% or	eartnerships of which more of their voting	n you are a general partner; securities; and any managing
	s. List all payments to an insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Ins	sider's Name	www	\$	\$	The second secon
Nu	umber Street				
_		***************************************			
Cit	ty State ZIP Code				
Îns	sider's Name		\$	\$	
Nu	umber Street				
_					
	ty State ZIP Code			·	
lithin 1 in insid nclude 2 No	1 year before you filed for bankruptcy, did yo		ayments or transf	er any property on	account of a debt that benefited
Vithin 1 in insid nclude 2 No	year before you filed for bankruptcy, did younger? payments on debts guaranteed or cosigned by		ayments or transf Total amount paid	er any property on Amount you still owe	account of a debt that benefited Reason for this payment Include creditor's name
/ithin 1 in inside Clude No Yes	year before you filed for bankruptcy, did younger? payments on debts guaranteed or cosigned by	an insider. Dates of	Total amount	Amount you still	Reason for this payment
Vithin 1 In inside No Yes	1 year before you filed for bankruptcy, did yo der? payments on debts guaranteed or cosigned by s. List all payments that benefited an insider.	an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
Vithin 1 In insidude No Yes	1 year before you filed for bankruptcy, did you der? payments on debts guaranteed or cosigned by s. List all payments that benefited an insider. sider's Name	an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
Vithin 1 Inside No No No Cit	1 year before you filed for bankruptcy, did you der? payments on debts guaranteed or cosigned by s. List all payments that benefited an insider. sider's Name	an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
Within 1 an inside Include V No Yes Ins	1 year before you filed for bankruptcy, did you der? payments on debts guaranteed or cosigned by s. List all payments that benefited an insider. sider's Name with the Street State ZIP Code	an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment

in 1 year before you filed for bankrup all such matters, including personal injur contract disputes.	t cy, were you a party in any la ry cases, small claims actions, c	wsuit, court action, or administrative proc divorces, collection suits, paternity actions, su	eeding? pport or custody modificati
lo 'es. Fill in the details.			
	Nature of the case	Court or agency	Status of the case
Focus 15 LLC and Golden Focus, itle: LLC v. William Watson, et al.	Debt Collection	NYS Supreme Court Court Name	Pending
		Queens County Number Street	On appeal Concluded
		Number Street	
number 2733/2019		City State ZIP Code	
		Court Name	Pending
itle:	•		On appeal
		Number Street	Concluded
		City State ZIP Code	handra des des distributes de ride altrese
number			
in I year before you flied for bankrup. k all that apply and fill in the details belo lo. Go to line 11. 'es. Fill in the information below.		repossessed, foreclosed, garnished, attac	hed, seized, or levied?
k all that apply and fill in the details beld lo. Go to line 11.			
k all that apply and fill in the details beld lo. Go to line 11.	ow.		
ck all that apply and fill in the details beld to. Go to line 11. Tes. Fill in the information below. Creditor's Name	Describe the prope	rty Date	
k all that apply and fill in the details beld to. Go to line 11. 'es. Fill in the information below.	Describe the prope	Date Date	
ck all that apply and fill in the details beld to. Go to line 11. Tes. Fill in the information below. Creditor's Name	Describe the prope Explain what happe	nty Date	
ck all that apply and fill in the details beld to. Go to line 11. Tes. Fill in the information below. Creditor's Name	Describe the prope	rty Date ened repossessed. foreclosed.	
ck all that apply and fill in the details below. Io. Go to line 11. Ios. Fill in the information below. Creditor's Name Number Street	Explain what happed Property was Property was Property was	rty Date ened repossessed. foreclosed.	hed, seized, or levied? Value of the property
ck all that apply and fill in the details beld to. Go to line 11. Tes. Fill in the information below. Creditor's Name Number Street	Explain what happe Property was Property was	rty Date ened repossessed. foreclosed. garnished. attached, seized, or levied.	Value of the property
ck all that apply and fill in the details beld to. Go to line 11. Tes. Fill in the information below. Creditor's Name Number Street	Explain what happe Property was Property was Property was Property was Property was	rty Date ened repossessed. foreclosed. garnished. attached, seized, or levied.	Value of the property
ck all that apply and fill in the details beld to. Go to line 11. Tes. Fill in the information below. Creditor's Name Number Street	Explain what happe Property was Property was Property was Property was Property was	rty Date ened repossessed. foreclosed. garnished. attached, seized, or levied.	
ck all that apply and fill in the details beld lo. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City State ZIP of Creditor's Name	Explain what happe Property was Property was Property was Property was Property was	rty Date ened repossessed. foreclosed. garnished. attached, seized, or levied.	Value of the property
ck all that apply and fill in the details beld to. Go to line 11. Tes. Fill in the information below. Creditor's Name Number Street City State ZIP of	Explain what happe Property was Property was Property was Property was Property was	rty Date pened repossessed. foreclosed. garnished. attached, seized, or levied. rty Date	Value of the property
ck all that apply and fill in the details beld lo. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City State ZIP of Creditor's Name	Explain what happed Property was Property was Property was Property was Describe the proped Explain what happed Property was	repossessed. foreclosed. garnished. attached, seized, or levied. rty Date	Value of the property
ck all that apply and fill in the details beld lo. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City State ZIP of Creditor's Name	Explain what happed Property was Property was Property was Property was Property was Explain what happed Property was	rity Date pened repossessed. foreclosed. garnished. attached, seized, or levied. rity Date pened repossessed. foreclosed.	Value of the propert
ck all that apply and fill in the details beld to. Go to line 11. Tes. Fill in the information below. Creditor's Name Number Street City State ZIP of Creditor's Name	Explain what happed Property was	rity Date pened repossessed. foreclosed. garnished. attached, seized, or levied. rity Date pened repossessed. foreclosed.	Value of the propert

William Watson First Name Middle Name Last N	Case number (if known)		
	otcy, did any creditor, including a bank or financial institution	n, set off any an	nounts from your
counts or refuse to make a payment bec	ause you owed a debt?		
] No			
Yes, Fill in the details.			
	Describe the action the creditor took	Date action was taken	Amount
Creditor's Name			
			•
Number Street			\$
21.	t act 4 digita of account asymptom VVVV		
City State ZIP Code	Last 4 digits of account number: XXXX-		
	cy, was any of your property in the possession of an assigne	e for the benefi	it of
editors, a court-appointed receiver, a cus	stodian, or another official?		
No			
Yes			
_			
5: List Certain Gifts and Contribut	tions		
thin 2 years before you filed for bankrupto No Yes. Fill in the details for each gift.			
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	Describe the gifts	Dates you gave	Value
No Yes. Fill in the details for each gift.		:	Value
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		Dates you gave	Value \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600		Dates you gave	Value \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		Dates you gave	Value \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		Dates you gave	V alue \$\$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift		Dates you gave	V alue \$\$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		Dates you gave	Value \$\$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street		Dates you gave	Value \$\$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift		Dates you gave	Value \$\$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street		Dates you gave	V alue \$\$
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you	Describe the gifts	Dates you gave the gifts	\$ \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600		Dates you gave the gifts	\$
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you	Describe the gifts	Dates you gave the gifts	\$ \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts	Dates you gave the gifts	\$ \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts	Dates you gave the gifts	\$ \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	\$ \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	\$ \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	\$ \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts	Dates you gave the gifts	\$ \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	\$ \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts	Dates you gave the gifts	\$ \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts	Dates you gave the gifts	\$ \$

1		Case number (if known)		
	First Name Middle Name Last	Name		
		tcy, did you give any gifts or contributions with a total value	of more than \$600	to any charity?
_ No				
Ye	s. Fill in the details for each gift or cont	ribution.		
	ifts or contributions to charities at total more than \$600	Describe what you contributed	Date you contributed	Value
			<u> </u>	\$
Cha	rity's Name			
		7		\$
Nun	nber Street			
		:		
	0			
City	State ZIP Code			
	•			
6:	List Certain Losses			
	escribe the property you lost and how e loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property
		Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.		
		i i		
				\$
				\$
				\$
7:	List Certain Payments or Trans	ifers		\$
			er any property to	\$anyone you
ithin onsul	1 year before you filed for bankrupte ted about seeking bankruptcy or pre	cy, did you or anyone else acting on your behalf pay or transt eparing a bankruptcy petition?		anyone you
ithin onsul	1 year before you filed for bankrupte ted about seeking bankruptcy or pre	cy, did you or anyone else acting on your behalf pay or transf		anyone you
ithin onsul clude	1 year before you filed for bankrupte lted about seeking bankruptcy or pro any attorneys, bankruptcy petition pre	cy, did you or anyone else acting on your behalf pay or transt eparing a bankruptcy petition?		anyone you
/ithin onsul clude	1 year before you filed for bankrupte ted about seeking bankruptcy or pre	cy, did you or anyone else acting on your behalf pay or transt eparing a bankruptcy petition?		anyone you
fithin onsul clude No Yes	1 year before you filed for bankrupte led about seeking bankruptcy or programy attorneys, bankruptcy petition press. Fill in the details.	cy, did you or anyone else acting on your behalf pay or transt eparing a bankruptcy petition?	r bankruptcy. Date payment or	anyone you Amount of paymen
/ithin onsul clude No Yes	1 year before you filed for bankrupte lted about seeking bankruptcy or pro any attorneys, bankruptcy petition pre	cy, did you or anyone else acting on your behalf pay or transferaring a bankruptcy petition? parers, or credit counseling agencies for services required in you Description and value of any property transferred	r bankruptcy.	
/ithin onsul clude No Yes	1 year before you filed for bankrupte led about seeking bankruptcy or proper any attorneys, bankruptcy petition press. Fill in the details.	cy, did you or anyone else acting on your behalf pay or transfeparing a bankruptcy petition? parers, or credit counseling agencies for services required in you	r bankruptcy. Date payment or	Amount of paymen
/ithin onsul clude No Yes	1 year before you filed for bankrupte led about seeking bankruptcy or proper any attorneys, bankruptcy petition press. Fill in the details.	cy, did you or anyone else acting on your behalf pay or transferaring a bankruptcy petition? parers, or credit counseling agencies for services required in you Description and value of any property transferred	r bankruptcy. Date payment or	
/ithin onsul clude No Yes	1 year before you filed for bankrupte led about seeking bankruptcy or pre any attorneys, bankruptcy petition pre s. Fill in the details.	cy, did you or anyone else acting on your behalf pay or transferaring a bankruptcy petition? parers, or credit counseling agencies for services required in you Description and value of any property transferred	r bankruptcy. Date payment or	Amount of paymen
/ithin onsul clude No Yes	1 year before you filed for bankrupte led about seeking bankruptcy or pre any attorneys, bankruptcy petition pre s. Fill in the details.	cy, did you or anyone else acting on your behalf pay or transferaring a bankruptcy petition? parers, or credit counseling agencies for services required in you Description and value of any property transferred	r bankruptcy. Date payment or	Amount of paymen
/ithin onsul clude No Yes	1 year before you filed for bankrupte ted about seeking bankruptcy or pre any attorneys, bankruptcy petition pre s. Fill in the details. ick & Zabicki LLP rson Who Was Paid	cy, did you or anyone else acting on your behalf pay or transferaring a bankruptcy petition? parers, or credit counseling agencies for services required in you Description and value of any property transferred	r bankruptcy. Date payment or	Amount of paymen
ithin onsul clude	1 year before you filed for bankrupte ted about seeking bankruptcy or pre any attorneys, bankruptcy petition pre s. Fill in the details. ick & Zabicki LLP rson Who Was Paid	cy, did you or anyone else acting on your behalf pay or transferaring a bankruptcy petition? parers, or credit counseling agencies for services required in you Description and value of any property transferred	r bankruptcy. Date payment or	Amount of paymen
PP Pe	1 year before you filed for bankrupte ted about seeking bankruptcy or present any attorneys, bankruptcy petition presents. Fill in the details. ick & Zabicki LLP before Who Was Paid imber Street	cy, did you or anyone else acting on your behalf pay or transferaring a bankruptcy petition? parers, or credit counseling agencies for services required in you Description and value of any property transferred	r bankruptcy. Date payment or	Amount of paymen
PP Pe	1 year before you filed for bankrupte lited about seeking bankruptcy or pre any attorneys, bankruptcy petition pre s. Fill in the details. ick & Zabicki LLP reson Who Was Paid rember Street	cy, did you or anyone else acting on your behalf pay or transferaring a bankruptcy petition? parers, or credit counseling agencies for services required in you Description and value of any property transferred	r bankruptcy. Date payment or	Amount of paymer

Perso	First Name Middle Name Last i	Name	•		
Numb	on Who Was Paid	war in the control of			
Numb	on Who Was Paid				
Numb	on Who Was Paid	Description and value of any property tra	nsferred	Date payment or transfer was made	Amount of payment
Numb	on Who Was Paid			THE STATE OF THE S	payment
					r.
					2
	per Street				\$
				***************************************	Ψ
City	State ZIP Code				
Email	or website address	•			
Perso	n Who Made the Payment, if Not You				
Do not inc	clude any payment or transfer that yo	ors or to make payments to your credite ou listed on line 16.			
Yes. F	Fill in the details.		1 1		
		Description and value of any property tran	nsferred	Date payment or transfer was made	Amount of payr
	W. G. B.S.	:		nullion via via	
⊬erso	on Who Was Paid				\$
Numb	per Street				
					\$
City	State ZIP Code				
transferre Include be Do not inc No	ed in the ordinary course of your b	nade as security (such as the granting of a			
		Description and value of property transferred	Describe any property of or debts paid in exchange		Date transfe was made
				-	
Person	n Who Received Transfer				
Persor	n Who Received Transfer				
Person					
Numbe	er Street				
Numbe	er Street				
Numbe	er Street State ZIP Code				
City	er Street State ZIP Code				
City Person	State ZIP Code on's relationship to you n Who Received Transfer				
City	State ZIP Code on's relationship to you n Who Received Transfer				
City Person	State ZIP Code on's relationship to you n Who Received Transfer				

otor 1	William Watson First Name Middle Na	me Last Name		Case number (if known)			
	rest name i i i i i i i i i i i i i i i i i i i	me Lasi Name					
	n 10 years before you f beneficiary? (These ar		, did you transfer any propert -protection devices.)	y to a self-settled trus	t or similar device of wh	nich you	
☑ No □ Ye	o es. Fill in the details.						
		ı	Description and value of the prope	rty transferred		Date transfer was made	
Na	ame of trust			. , , , , , , , , , , , , , , , , , , ,			
		: :					
t 8:	List Certain Finance	cial Accounts. I	nstruments, Safe Deposit	Boxes, and Storag	ie Units	**************************************	
Includ broke	rage houses, pension	money market, or o	other financial accounts; certi es, associations, and other fin		res in banks, credit uni	ons,	
	s, in the details.	I	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance befo closing or transfe	
	Capital One Bank lame of Financial Institution		xxxx	Checking	06/30/2020	\$ <u>0.00</u>	
, -	lumber Street			Savings Money market			
Ĉ	City Sta	te ZIP Code		Brokerage Other			
Ñ	lame of Financial Institution		xxxx	Checking Savings	·	\$	
ñ 	lumber Street	AND THE RESIDENCE OF THE PARTY		Money market Brokerage			
ō	City Sta	te ZIP Code		Other			
secur No	ities, cash, or other va		r before you filed for bankrup	tcy, any safe deposit b	ox or other depository	for	
- . 1€	, o, rig in the details,		Who else had access to it?	Describe th	e contents	Do you sti	
<u> </u>	iame of Financial Institution	, ,	ame	· · · · · · · · · · · · · · · · · · ·		No Yes	
ñ	lumber Street		iumber Street	· ·		WAS COUNTS AND	
-	<u> </u>	ō	ity State ZIP Code			4.000 H	

را الالا					-	ase number (if known)		
First t	Name Middle Name	Last	Name					
				_				
-	red property in a s	torage unit o	or place other than yo	our home w	ithin 1 year	before you filed for ban	kruptcy?	
☑ No ☑ Yes Fill i	in the details.							
162. Fill i	in the details.		Who else has or had	access to it	,	Describe the contents		Do you st
			17110 0100 11110 01 1111		•		ramana menakanna arah menanan m	have it?
D 1 5 6	. .		Dobtos Only			Clothing items belongin North Corp.	ig to Friends Up	□ No
Public S Name of	Storage Facility		Debtor Only Name			•		✓ Yes
	orthern Boulevard							E
Number			Number Street			-		
Long Isl	and City NY	11101	City State ZIP Code					
City	State	ZIP Code						
t 9: Id	lentify Property	You Hold	or Control for Som	eone Else	•			
lo you hold	or control any pro	norty that co	maone also owns? I	nclude any	property w	ou borrowed from, are s	torina for	
	ust for someone.	perty mat st	omeone else owns i	include any	property y	ou portowed from, are s	toring for,	
□No								
Yes. Fill	in the details.							
			Where is the property	r?		Describe the property	•	Value
Eriondo	s Up North Corp.					Clothing Items		
Owner's								500.00
	панне							
	ast 6th Street		Public Storage			_		
	st 6th Street		Number Street					
703 Ea	st 6th Street		Number Street	NIV	11101	- ! 		
703 Ea	st 6th Street Street Ork NY	10009		NY State	11101 ZIP Code			
703 Ea	st 6th Street Street	10009 ZIP Code	Number Street Long Island City			-		
703 Ea Number New York	st 6th Street Street Ork NY State	ZIP Code	Number Street Long Island City	State		- ! - ·		
New York 10: G	st 6th Street Street Ork NY State ive Details Abou	ZIP Code Jt Environn	Number Street Long Island City City nental Information	State				
703 Ea Number New York City 1 10: Gither purpose	ork NY State Street About Ork NY State Ore Details About of Part 10, the following state of the state of	ZP Code ut Environn llowing defin	Number Street Long Island City City nental Information attions apply:	State	ZIP Code	-		
703 Ea Number New York City 1 10: G the purpose	ork NY State ive Details Aboute of Part 10, the foliatal law means any	ZIP Code It Environn Ilowing defin federal, stat	Long Island City City nental Information sitions apply: e, or local statute or	State n regulation (ZIP Code	pollution, contamination		
703 Ea Number New York City 110: G Che purpose Environment azardous c	ork NY State ive Details Aboute of Part 10, the foliatal law means any or toxic substances	ZP Code Jt Environn Ilowing defin federal, stat s, wastes, or	Long Island City City nental Information sitions apply: e, or local statute or	State n regulation e land, soil, s	ZIP Code concerning surface wa	ter, groundwater, or othe		
New York 10: Gither purpose Environment azardous concluding st	ork NY State ive Details Aboute of Part 10, the foliatal law means any or toxic substances atutes or regulation	ZIP Code It Environm Illowing defin federal, stat s, wastes, or ns controllin	Long Island City City nental Information itions apply: e, or local statute or material into the air, ng the cleanup of these	State regulation (land, soil, see substance	ZIP Code concerning surface wa ces, wastes	ter, groundwater, or others, or material.	er medium,	
New York to purpose the purpose azardous concluding stiffe means	ork NY State ive Details Aboute of Part 10, the foliatal law means any or toxic substances atutes or regulation any location, facility	ZIP Code It Environn Illowing defin federal, stat s, wastes, or ns controllin ty, or proper	Long Island City City nental Information itions apply: e, or local statute or material into the air, ng the cleanup of these	State regulation (land, soil, see substance	ZIP Code concerning surface wa ces, wastes	ter, groundwater, or othe	er medium,	
New York to the purpose invironment azardous concluding state means a roused to	ork NY State ive Details Aboute of Part 10, the foliatal law means any or toxic substances at utes or regulation any location, facility own, operate, or uniform the state of	ZP Code It Environn Ilowing defin federal, stat s, wastes, or ns controllin ty, or proper utilize it, incli	Long Island City City nental Information nitions apply: e, or local statute or material into the air, eg the cleanup of these ty as defined under a uding disposal sites.	State regulation elland, soil, se substance ny environr	ziP Code concerning surface wa ces, wastes nental law,	ter, groundwater, or other, or material. whether you now own, o	er medium, operate, or utilize	
New Y. City 10: Githe purpose invironment agardous concluding straight means or used to lazardous it	ork NY State ive Details Aboute of Part 10, the foliatal law means any or toxic substances at utes or regulation any location, facility own, operate, or unaterial means any	ZP Code It Environn Illowing defin federal, stat s, wastes, or ns controllin ty, or proper utilize it, inclu ything an env	Long Island City City nental Information nitions apply: e, or local statute or material into the air, eg the cleanup of these ty as defined under a uding disposal sites.	State regulation of land, soil, see substance my environmes as a haz	ziP Code concerning surface wa ces, wastes nental law,	ter, groundwater, or others, or material.	er medium, operate, or utilize	
New York Total Tot	ork NY State ive Details Aboute of Part 10, the foliatal law means any or toxic substances atutes or regulation any location, facility own, operate, or unaterial means any hazardous material	ZP Code It Environn Ilowing defin federal, stat s, wastes, or ns controllin ty, or proper utilize it, incluy thing an envii, pollutant, o	Long Island City City nental Information itions apply: e, or local statute or material into the air, eg the cleanup of these ty as defined under a uding disposal sites. vironmental law define	State regulation of land, soil, see substance my environmes as a hazar term.	concerning surface wa ces, wastes nental law,	ter, groundwater, or other, or material. whether you now own, one of the standard was a substance of the standard was substandard was substance of the standard was substance of the standard was substandard was substance of the standard was substandard was substandar	er medium, operate, or utilize	
New York Total Tot	ork NY State ive Details Aboute of Part 10, the foliatal law means any or toxic substances atutes or regulation any location, facility own, operate, or unaterial means any hazardous material	ZP Code It Environn Ilowing defin federal, stat s, wastes, or ns controllin ty, or proper utilize it, incluy thing an envii, pollutant, o	Long Island City City nental Information sitions apply: e, or local statute or material into the air, eg the cleanup of these ty as defined under a uding disposal sites.	State regulation of land, soil, see substance my environmes as a hazar term.	concerning surface wa ces, wastes nental law,	ter, groundwater, or other, or material. whether you now own, one of the standard was a substance of the standard was substandard was substance of the standard was substance of the standard was substandard was substance of the standard was substandard was substandar	er medium, operate, or utilize	
New York Title Grant Title Gra	ork NY State ive Details Aboute of Part 10, the foliatal law means any or toxic substances atutes or regulation any location, facility own, operate, or unaterial means any hazardous material ses, releases, and pressure of the state of the	ZP Code It Environn Illowing defin federal, states, or ns controllin ty, or proper utilize it, incluy thing an em it, pollutant, or	Long Island City City nental Information sitions apply: e, or local statute or material into the air, ng the cleanup of these ty as defined under a uding disposal sites. vironmental law definencemental law	regulation of land, soil, see substance ny environmes as a hazar term.	concerning surface wa ses, wastes nental law, cardous wa	ter, groundwater, or other, or material. whether you now own, one of the standard was a substance of the standard was substandard was substance of the standard was substance of the standard was substandard was substance of the standard was substandard was substandar	er medium, operate, or utilize ce, toxic	······
New York Total Tot	ork NY State ive Details Aboute of Part 10, the foliatal law means any or toxic substances atutes or regulation any location, facility own, operate, or unaterial means any hazardous material ses, releases, and pressure of the state of the	ZP Code It Environn Illowing defin federal, states, or ns controllin ty, or proper utilize it, incluy thing an em it, pollutant, or	Long Island City City nental Information sitions apply: e, or local statute or material into the air, ng the cleanup of these ty as defined under a uding disposal sites. vironmental law definencemental law	regulation of land, soil, see substance ny environmes as a hazar term.	concerning surface wa ses, wastes nental law, cardous wa	ter, groundwater, or other, or material. whether you now own, outside the standard substance they occurred.	er medium, operate, or utilize ce, toxic	•
New York Total Tot	ork NY State ive Details Aboute of Part 10, the following any for toxic substances at the own, operate, or unaterial means any hazardous material es, releases, and permental unit not	ZP Code It Environn Illowing defin federal, states, or ns controllin ty, or proper utilize it, incluy thing an em it, pollutant, or	Long Island City City nental Information sitions apply: e, or local statute or material into the air, ng the cleanup of these ty as defined under a uding disposal sites. vironmental law definencemental law	regulation of land, soil, see substance ny environmes as a hazar term.	concerning surface wa ses, wastes nental law, cardous wa	ter, groundwater, or other, or material. whether you now own, outside the standard substance they occurred.	er medium, operate, or utilize ce, toxic	,
New York the purpose for vironment azardous of concluding state means for used to lazardous in the purpose for used to lazardous in the lazardous in th	ork NY State ive Details Aboute of Part 10, the foliatal law means any or toxic substances atutes or regulation any location, facility own, operate, or unaterial means any hazardous material ses, releases, and pressure of the state of the	ZP Code It Environn Illowing defin federal, states, or ns controllin ty, or proper utilize it, incluy thing an em it, pollutant, or	Long Island City City nental Information sitions apply: e, or local statute or material into the air, ng the cleanup of these ty as defined under a uding disposal sites. vironmental law definencemental law	regulation of land, soil, see substance ny environmes as a hazar term.	concerning surface wa ses, wastes nental law, cardous wa	ter, groundwater, or other, or material. whether you now own, outside the standard substance they occurred.	er medium, operate, or utilize ce, toxic	}
New York the purpose for vironment azardous of concluding state means for used to lazardous in the purpose for used to lazardous in the lazardous in th	ork NY State ive Details Aboute of Part 10, the following any for toxic substances at the own, operate, or unaterial means any hazardous material es, releases, and permental unit not	ZP Code It Environn Illowing defin federal, states, or ns controllin ty, or proper utilize it, incluy thing an em it, pollutant, or	Long Island City City nental Information sitions apply: e, or local statute or material into the air, ng the cleanup of these ty as defined under a uding disposal sites. vironmental law definencemental law	regulation of land, soil, see substance ny environmes as a hazar term.	concerning surface wa ces, wastes nental law, cardous wa s of when t	ter, groundwater, or other, or material. whether you now own, outside the standard substance they occurred.	er medium, operate, or utilize ce, toxic nvironmental law	ate of notice
New York Total Tot	ork NY State ive Details Aboute of Part 10, the following any for toxic substances at the own, operate, or unaterial means any hazardous material es, releases, and permental unit not	ZP Code It Environn Illowing defin federal, states, or ns controllin ty, or proper utilize it, incluy thing an em it, pollutant, or	Long Island City City nental Information attions apply: e, or local statute or material into the air, ng the cleanup of these ty as defined under a uding disposal sites. vironmental law define contaminant, or simil that you know about it you may be liable o	regulation of land, soil, see substance ny environmes as a hazar term.	concerning surface wa ces, wastes nental law, cardous wa s of when t	ter, groundwater, or other, or material. whether you now own, on the standard was substandard with the standard was substandard. The standard was substandard was substandar	er medium, operate, or utilize ce, toxic nvironmental law	
New York Title Purpose Training State Means to rused to dazardous in ubstance, lort all notice as any governous No Yes. Fill	ork NY State ive Details Aboute of Part 10, the following author toxic substances at the sor regulation any location, facility own, operate, or unaterial means any hazardous material es, releases, and premental unit not in the details.	ZP Code It Environn Illowing defin federal, states, or ns controllin ty, or proper utilize it, incluy thing an em it, pollutant, or	Long Island City City nental Information sitions apply: e, or local statute or material into the air, ig the cleanup of these ty as defined under a uding disposal sites. vironmental law define contaminant, or simil that you know about t you may be liable of	regulation of land, soil, see substance ny environmes as a hazar term.	concerning surface wa ces, wastes nental law, cardous wa s of when t	ter, groundwater, or other, or material. whether you now own, on the standard was substandard with the standard was substandard. The standard was substandard was substandar	er medium, operate, or utilize ce, toxic nvironmental law	
New York Total Tot	ork NY State ive Details Aboute of Part 10, the following author toxic substances at the sor regulation any location, facility own, operate, or unaterial means any hazardous material es, releases, and premental unit not in the details.	ZP Code It Environn Illowing defin federal, states, or ns controllin ty, or proper utilize it, incluy thing an em it, pollutant, or	Long Island City City nental Information attions apply: e, or local statute or material into the air, ng the cleanup of these ty as defined under a uding disposal sites. vironmental law define contaminant, or simil that you know about it you may be liable o	regulation of land, soil, see substance ny environmes as a hazar term.	concerning surface wa ces, wastes nental law, cardous wa s of when t	ter, groundwater, or other, or material. whether you now own, on the standard was substandard with the standard was substandard. The standard was substandard was substandar	er medium, operate, or utilize ce, toxic nvironmental law	
New York Total Tot	ork NY State ive Details Aboute of Part 10, the follow means any or toxic substances atutes or regulation any location, facility own, operate, or umaterial means any hazardous material es, releases, and pernmental unit not in the details.	ZP Code It Environn Illowing defin federal, states, or ns controllin ty, or proper utilize it, incluy thing an em it, pollutant, or	Long Island City City nental Information sitions apply: e, or local statute or material into the air, ig the cleanup of these ty as defined under a uding disposal sites. vironmental law define contaminant, or simil that you know about t you may be liable of	regulation of land, soil, see substance ny environmes as a hazar term.	concerning surface wa ces, wastes nental law, cardous wa s of when t	ter, groundwater, or other, or material. whether you now own, on the standard was substandard with the standard was substandard. The standard was substandard was substandar	er medium, operate, or utilize ce, toxic nvironmental law	
New York Total Tot	ork NY State ive Details Aboute of Part 10, the follow means any or toxic substances atutes or regulation any location, facility own, operate, or umaterial means any hazardous material es, releases, and pernmental unit not in the details.	ZP Code It Environn Illowing defin federal, states, or ns controllin ty, or proper utilize it, incluy thing an em it, pollutant, or	Long Island City City nental Information sitions apply: e, or local statute or material into the air, ig the cleanup of these ty as defined under a uding disposal sites. vironmental law define contaminant, or simil that you know about t you may be liable of Governmental unit	regulation of land, soil, see substance ny environmes as a hazar term.	concerning surface wa ces, wastes nental law, cardous wa s of when t	ter, groundwater, or other, or material. whether you now own, on the standard was substandard with the standard was substandard. The standard was substandard was substandar	er medium, operate, or utilize ce, toxic nvironmental law	

1 First Name	Middle Name	La	st Name	Case number (if known)	***************************************	
ave you notified any	/ governn	nental unit o	of any release of hazardous mater	al?		
I No						
Yes. Fill in the de	tails.					
			Governmental unit	Environmental law, if you know	it	Date of notice
				_		
Name of site			Governmental unit			
Number Street	·		Number Street			i
			- City State ZIP Code	-		
City	State	ZIP Code				
	y in any ju	udicial or ac	Iministrative proceeding under an	y environmental law? Include s	ettlements and	orders.
No Yes. Fill in the det	tails.					
			Court or agency	Nature of the case		Status of the case
Case title						
ouse and			Court Name			Pending
			***************************************			On appea
			Number Street			☐ Conclude
						
Case number			City State ZiP Co	de		
A sole proprie A member of a A partner in a	etor or sel a limited l partnersh	f-employed iability com hip	otcy, did you own a business or he in a trade, profession, or other ac pany (LLC) or limited liability part	tivity, either full-time or part-tin	•	isiness?
☐ An officer, dire	ector, or r	managing e	xecutive of a corporation			
An owner of a	t least 5%	of the voti	ng or equity securities of a corpor	ation		
No. None of the al	bove app	lies. Go to P	'art 12.			
Yes. Check all tha	it apply al	bove and fil	in the details below for each bus	iness.		
Friends Up North	Corn		Describe the nature of the busines	s Employer lo	lentification numl	per
Business Name	оогр.		Apparel - Bankrupt	Do not inclu	ide Social Securi	ty number or ITIN.
703 East 6th Stre	ent .			FIN. Q	1 2 R 2	4 0 9 5
Number Street	-01				<u> - </u>	_ <u>+ </u>
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Dates busin	ess existed	1.5
			Name of accountant or bookkeep		100/00/	
New York	NY	10009		From 0 <u>6/</u>	02/2016	To 12/17/2019
City	State	ZIP Code	<u> </u>			**********
Sanddance Corp	<u>.</u>		Describe the nature of the busines	Do not inclu	lentification numb	er ly number or ITIN.
Business Name	-		Shell/Holding Company - Never	Operated De not inclu	rue Godiai Securii	y number of HRV.
4810 43rd Street				EIN: <u>8</u>	3 -2 7 2	2 7 4 1
Number Street				Dates busin		
Apt. 3F					dəs existeq	* *
18/n o doi-i-	K IN /	44077	Name of accountant or bookkeeps		/NE/2019	To Current
Woodside	NY	11377		From <u>11</u>	<u>/06/20</u> 18	To <u>Current</u>
City	State	ZIP Code		↓		

	William Watson First Name Middle Name La		st Name Case number (# known)			
Tennis the Mena Business Name 4810 43rd Street Number Street			Describe the nature of the business Shell/Holding Company - Never Operated	Employer Identification number Do not include Social Security number or ITIN EIN: 8 1 -4 6 9 4 3 5 Dates business existed		
Apt. 3F Woodside	NY	11377	Name of accountant or bookkeeper	From 12/14/2016 To Current		
City	State	ZIP Code				
No Yes. Fill in the det			Date issued			
Name			MM / DD / YYYY			
Number Street		each and a second				
City	State	ZiP Code				
	!					
have read the ansv nswers are true an connection with a	id correct. a bankrupt 41, 1519, a	l understan lcy case can	t of Financial Affairs and any attachments, and I dec d that making a false statement, concealing propert result in fines up to \$250,000, or imprisonment for	y, or obtaining money or property by fraud		
have read the answers are true an connection with a U.S.C. §§ 152, 13	id correct. a bankrupt 41, 1519, a	l understan lcy case can	d that making a false statement, concealing propert result in fines up to \$250,000, or imprisonment for	y, or obtaining money or property by fraud		
have read the answers are true an connection with a B U.S.C. §§ 152, 13. /s/ William Wats Signature of Debto Date 11/16/2020 id you attach addit	on On	I understan tcy case can and 3571.	d that making a false statement, concealing propert result in fines up to \$250,000, or imprisonment for Signature of Debtor 2	ry, or obtaining money or property by fraud up to 20 years, or both.		
have read the answinswers are true and connection with a 8 U.S.C. §§ 152, 13. /s/ William Wats Signature of Debto Date 11/16/2020 id you attach addit No Yes	on on on tional page	I understan toy case can and 3571.	d that making a false statement, concealing propert result in fines up to \$250,000, or imprisonment for Signature of Debtor 2	ry, or obtaining money or property by fraud up to 20 years, or both.		

William Watson

Debtor 1

First Name Middle Name Last Name Case number (if known)____

Continuation Sheet for Official Form 107

27) Businesses

Business Name: Oxojoe Corp.

4810 43rd Street Apt. 3F

Woodside, NY 11377

Describe the Nature of the business: Shell/Holding Company - Never Operated

EIN: 84-2194316

Dates business existed: From: 11/09/2018 To: Current

Fill in this information to identify your case:		
William Watson		
Debtor 1 First Name Middle Name Last N	ane	
Debtor 2 First Name Middle Name Last N	iame	
United States Bankruptcy Court for the Eastern District of New York		
Case number		Check if this is a
(If known)		amended filing
Official Form 108		
Statement of Intention for In	dividuals Filing Under Cha	apter 7 12/15
If you are an individual filing under chapter 7, you must fill our creditors have claims secured by your property, or you have leased personal property and the lease has not en you must file this form with the court within 30 days after you whichever is earlier, unless the court extends the time for caulif two married people are filing together in a joint case, both as Both debtors must sign and date the form. Be as complete and accurate as possible. If more space is need write your name and case number (if known).	expired. file your bankruptcy petition or by the date set for the se. You must also send copies to the creditors and les re equally responsible for supplying correct informatio	sors you list on the form. n.
Part 1: List Your Creditors Who Have Secured Claim	ms	
 For any creditors that you listed in Part 1 of Schedule D: 0 information below. 	Creditors Who Have Claims Secured by Property (Offic	ial Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	Surrender the property.	No
name:	Retain the property and redeem it.	Yes
Description of property	Retain the property and enter into a Reaffirmation Agreement.	
securing debt:	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	No
name:	Retain the property and redeem it.	Yes
Description of property	Retain the property and enter into a	
securing debt:	Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	Surrender the property.	No
name:	Retain the property and redeem it.	Yes
Description of property	Retain the property and enter into a	
securing debt:	Reaffirmation Agreement. Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	
name:	Retain the property and redeem it.	Yes
Description of property	Retain the property and enter into a	
securing debt:	Reaffirmation Agreement. Retain the property and [explain]:	
	Treating the property and texhiam.	

	William Watson	Case number (If known)
t 2:	List Your Unexpired Personal Property Lea	ses
any und	expired personal property lease that you listed in formation below. Do not list real estate leases. Un	Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G) nexpired leases are leases that are still in effect; the lease period has not yet se if the trustee does not assume it. 11 U.S.C. § 365(p)(2).
	e your unexpired personal property leases	Will the lease be assumed?
Lessor's	^{name:} Hyundai Capital America	No
	on of leased 2020 Kia Sportage	▼ Yes
	^{name:} Public Storage	□No
	on of leased Storage Unit Lease	₹Yes
_essor's	name:	No
Descript property	on of leased	Yes
_essor's	name:	No
Descript property:	on of leased	Yes
_essor's	name:	No
Descripti property:	on of leased	Yes
_essor's	name:	□ No
Descript property:	on of leased	Yes
_essor's	name:	□No
Descripti property	on of leased	☐ Yes
nder pe	Sign Below nalty of perjury, I declare that I have indicated my property that is subject to an unexpired lease.	intention about any property of my estate that secures a debt and any
/s/ Wil	iam Watson	
•	•	gnature of Debtor 2
Jaie	16/2020 DD / YYYY	ite

Official Form 108

Debtor 1 William Watson Trail terms Debtor 2 Washing		dia dai information de identifica						
Debtor 2 Visit Name Visit		ll in this information to identify your case:			4			and in
Case number College	De	-10,				OIII 122A-130	hh.	
College States Backsopping Court for the: Eastern District of New York	De		Last Mame		[1. There is no	presumption of abuse.	
United Steels Barkingstey Count for the: Eastern District of New York Americal Form 122A—1			Last Name					
Official Form 122A—1 Chapter 7 Statement of Your Current Monthly Income 0420 Bas acomplete and accurate as possible. If two married people are filling together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if shown), If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under 8 707(b)(2) (Official Form 122A-15upp) with this form. Part 1: Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. Not married. Fili out Column A, lines 2-11. Married and your spouse is filing with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living in the same household and are not legally separated under nonbankrupto; have that applies or that you and your spouse are legally separated under nonbankrupto; have that applies or that you and your spouse are legally separated under nonbankrupto; have that applies or that you and your spouse are legally separated under nonbankrupto; have that applies or that you and your spouse are legally separated. Fill out both Columns A and B, lines 2-11. It is separately or peluty that you and your spouse are legally separated under nonbankrupto; have that applies or that you and your spouse are legally separated. Fill out both Columns A and B, lines 2-11. It is separately or peluty that you and your spouse are legally separated. Fill out both Columns A and B, lines 2-11. It is not to the service of the s	Un	ted States Bankruptcy Court for the: Eastern District of New Yo	rk					
Official Form 122A—1 Chapter 7 Statement of Your Current Monthly Income 8 as complete and accurate as possible. If two married people are filling together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known), if you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debits to because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under \$770(b)(2) (Official Form 122A-15upp) with this form. Port 12 Calculate Your Current Monthly Income 1. What is your marital and filling status? Check one only. Not married. If our Column A, lines 2-11. Married and your spouse is NOT filling with you. Viou and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out both Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated of the response are living and part for reasons that do not include evading the Means Test requirements, I U.S.C. \$707(b)(7)(b). Fill in the average menthly income that you received from all sources, derived during the 6 full months before you file this behaviory case. It U.S.C. \$101(10A). For example, if you are filling on Septement 1, tile. & \$100(b)(7)(b)(b). Fill in the result. Do not include any income amount more than one. For example, if you are filling on Septement 1, tile. & \$100(b)(7)(b)(b). Fill in the result. Do not include any income amount more than one. For example, if you are filling on Septement 1, tile. & \$100(b)(b)(b)(b)(b)(b)(b)(b)(b)(b)(b)(b)(b)(0			
Chapter 7 Statement of Your Current Monthly Income Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known), if you believe that you are exempted from a presumption of abuse because you do not have primarily consumer dobts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under \$707(8)/2) (Official Form 122A-1Supp) with this form. Port 15 Calculate Your Current Monthly Income	(11)	anown)				qualified n	nilitary service but it could apply	/ later.
Chapter 7 Statement of Your Current Monthly Income Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate, if more space is needed, attach a separate sheet to this form, include the line number to which the additional information apples. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because yeu do not have primarity consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under \$707(b)(2) (Official Form 122A-1Supp) with this form. Port 15 Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. Not married, Fill out Column A, lines 2-11. Married and your spouse is NOT filing with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Doth. Column B, by checking this box, you declare under penalty of perjury that you and your spouse are legally separated under orneharcharptely law that angles or that you and your spouse are legally separated under orneharcharptely law that angles or that you and your spouse are legally separated under orneharcharptely law that angles or that you and your spouse are legally separated under orneharcharptely law that angles or that you and your spouse are legally separated under orneharcharptely law that angles or that you and your spouse are legally separated under orneharcharptely law that angles or that you and your spouse are legally separated under orneharcharptely law that angles or that you and your spouse are legally separated under orneharcharptely law that angles or that you and your spouse are legally separated under orneharcharptely law that angles or that you and your spouse are legally separated under orneharbtely law that the your spouse legalla					ľ	T Charlest His	s is an amonded filing	
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exemption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under \$70f(b)(2) (Official Form 1224-A15upp) with this form. Part 12 Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. Not married, Fill out Column A, lines 2-11. Married and your spouse is filling with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separatedy or are legally separated. Fill out Dolumn A, lines 2-11, do not fill out Column B, by checking this box, you declare under penalty of perity that you and your spouse are legally separated under norbankrupty law that applies or that you and your spouse are fiving apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B). Fill in the warrage monthly income that your received from all sources, derived during the \$ foll months before under probankrupty law that applies or that you and your spouse are fiving apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B). Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income f					•	mar Official in this	s is an amended iming	
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate, if more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies, On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under \$70f(b)(2) (Official Form 1224-A15upp) with this form. Part 12 Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. Not married, Fill out Column A, lines 2-11. Married and your spouse is filling with you. Fill out both Columns A and B, lines 2-11. Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated and the more fill out Columns A and B, lines 2-11. Living separately or are legally separated and the more fill out Columns A and B, lines 2-11. Living separately or are legally separated and the more fill out Columns A and B, lines 2-11. Living separately or are legally separated under norbankrupcy law that apples or that you and your spouse are legally separated under norbankrupcy law that apples or that you and your spouse are line and the service of fill on the living the service of the fill on the service of the service of the same rental property, put the income from that property in one column only. If you have nothing to report for any line, wite 50 in the space. Solumn A	Of	ficial Form 122A–1						
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a payingtion of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under's 570t/b/2) (Official Form 122A-15upp) with this form. Part 1 Calculate Your Current Monthly Income			C	-4 M-	4k.l.	. 1	_	
space is needed, attach a separate sheet to this form. Include the line number to which the additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)/2) (Official Form 122A-1Supp) with this form. Part 1: Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. Married and your spouse is filing with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally spaper for reasons that do not include evading the Means Test requirements. 11 U.S.C. \$700(17)(E). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankrupter case. 11 U.S.C. \$101(10A). For example, if you are filing on September 15, the E-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the sample, if both spouses own th	<u>VI</u>	napter / Statement of Your	Curre	Ut MO	ntniy	/ Incom	e	04/20
1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married and your spouse is filling with you. You and your spouse are: Warried and your spouse is filling with you. You and your spouse are: Wing in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated. Fill out Column B to 970(1/3). War are average monthly lincome that you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result, Do not include any income amount more than once. For example, if both spouses on the same rental are are are an add the income form an add the property, put the income from any source which are regularly paid for household expenses of you or your dependents, including child support. Include	addi do n Abu	tional pages, write your name and case number (if knoon that primarily consumer debts or because of qualify se <i>Under</i> § 707(b)(2) (Official Form 122A-1Supp) with the	wn). If you l ying militar is form.	believe that	you are o	exempted from	a presumption of abuse bec	ause you
Not married, Fill out Column A, lines 2-11. Married and your spouse is filling with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filling with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirement. U. S.C. § 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write 80 in the spece. Column A Debtor 1								
Married and your spouse is filling with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filling with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Debtor 1 Debtor 2 or non-filling spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroil deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from a unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, or farm Gross receipts (before all deductions) Ordinary	1		•					
Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. S 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. S 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. fit he amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write 30 in the space. Column A Debtor 1 Debtor 2 Debtor 2 Debtor 2 Debtor 1 Debtor 2 S S S S S S S S S S S S S S S S S S		·	both Colum	nns A and B.	lines 2-1	1.		
Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nombankruptcy law that applies or that you and your spouse are legally separated under nombankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column B Debtor 1 Debtor 1 Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an ummarried partner, members of your household, your dependents, parents, and roommates, include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, or farm Gross receipts (before all deductions) S Copy here \$						•		
Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column B Debtor 1 Debtor 2 or non-filling spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an spouse only if Column B is not filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, or farm Gross receipts (before all deductions) Symptomic payments you listed on line 3. Copy Symptomic payments you listed on line 3. Copy Symptomic payments your dependents payments from a spouse only if Column B is not filled in. On ont include payments you listed on line 3. Copy Symptomic payments your dependents payments from a spouse only if Column B is not filled in. Copy Symptomic payments your dependents payments from a spouse only i			-			mns A and B. lir	nes 2-11.	
under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7/b)(8). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filling spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). \$	of population and	-						clare
bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Debtor 1 Debtor 2 or non-filing spouse	and the second second second second	under penalty of perjury that you and your spous	se are legall	y separated	under nor	bankruptcy law	that applies or that you and yo	
Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, or farm Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm Gross receipts (before all deductions) S S Copy here \$ S Copy here \$ Copy S Copy Gross receipts (before all deductions) S Copy Here Copy Gross receipts (before all deductions) S Copy Here Copy Here Copy Copy Here Copy Copy Here Copy Copy Copy Copy Copy Copy Copy Cop	обествення в принцення в п	bankruptcy case. 11 U.S.C. § 101(10A). For example, if August 31. If the amount of your monthly income varied of Fill in the result. Do not include any income amount more	f you are filir during the 6 than once.	ng on Septer months, add For example	nber 15, t the incor , if both s	he 6-month perione for all 6 mont pouses own the	od would be March 1 through hs and divide the total by 6. same rental property, put the	
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, or farm Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm S. Copy here \$								
(before all payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, or farm Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm S. S. Copy here \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	NATIONAL PARTIES AND SERVICE A					Deptor 1	non-filing spouse	
Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, or farm Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm S. Copy here \$	2		nd commis	sions		\$	\$	
of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, or farm Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm Gross receipts (before all deductions) Ordinary and necessary operating expenses Ordinary and necessary operating expenses S	3		ayments fro	m a spouse	if	\$	\$	
or farm Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm Net income from rental and other real property Gross receipts (before all deductions) Ordinary and necessary operating expenses Section 2 Copy here → \$ Copy Copy Copy Copy Copy Copy Copy Copy Copy Copy here → \$ Copy C	4	of you or your dependents, including child support. I from an unmarried partner, members of your household, and roommates. Include regular contributions from a spo	nclude regul your depend	lar contributi dents, parent	ons s,	\$	\$	
or farm Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm 6. Net income from rental and other real property Gross receipts (before all deductions) Ordinary and necessary operating expenses Scory Copy here \$	5		Debtor 1	Debtor 2				
Ordinary and necessary operating expenses -\$ -\$ -\$ \\ Net monthly income from a business, profession, or farm \$ \$ \text{Copy} \\ 6. \text{Net income from rental and other real property} \text{Debtor 1} \text{Debtor 2} \\ Gross receipts (before all deductions) \$ \text{S} - \tex			\$					
Net monthly income from a business, profession, or farm \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$, ,	- \$	- \$_				
6. Net income from rental and other real property Gross receipts (before all deductions) Ordinary and necessary operating expenses Debtor 1 \$ 5 - \$ Conv.	II FEBRUARI PARAME	• • • • •	\$	\$		\$	\$	
Ordinary and necessary operating expenses -\$	6	. Net income from rental and other real property	Ψ		nele F	*	*	
Conv	inner on the sand		P					
i incrinant modera from formator of the formation of the	and the same of th	Net monthly income from rental or other real property	φ	Ψ	Сору	¢	\$	

7. Interest, dividends, and royalties

Pebtor 1 William Watson	Case number (if known)
First Name Middle Name Last Name	
	Column A Column B Debtor 1 Debtor 2 or non-filing spouse
8. Unemployment compensation	\$ \$
Do not enter the amount if you contend that the amount received was a bene under the Social Security Act. Instead, list it here:	efit
For you \$	-
For your spouse\$	na.
9. Pension or retirement income. Do not include any amount received that wa benefit under the Social Security Act. Also, except as stated in the next sente not include any compensation, pension, pay, annuity, or allowance paid by th States Government in connection with a disability, combat-related injury or disdeath of a member of the uniformed services. If you received any retired pay under chapter 61 of title 10, then include that pay only to the extent that it doe exceed the amount of retired pay to which you would otherwise be entitled if under any provision of title 10 other than chapter 61 of that title.	ence, do ne United sability, or paid es not
10. Income from all other sources not listed above. Specify the source and are not include any benefits received under the Social Security Act; payments may the Federal law relating to the national emergency declared by the President National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronal disease 2019 (COVID-19); payments received as a victim of a war crime, a call against humanity, or international or domestic terrorism; or compensation, per pay, annuity, or allowance paid by the United States Government in connection disability, combat-related injury or disability, or death of a member of the uniform necessary, list other sources on a separate page and put the total below.	ade under under the avirus rime unsion, on with a
	\$
	\$\$
Total amounts from separate pages, if any.	+ \$
11. Calculate your total current monthly income. Add lines 2 through 10 for eacolumn. Then add the total for Column A to the total for Column B. Part 2: Determine Whether the Means Test Applies to You	ach \$ + \$ = \$
12. Calculate your current monthly income for the year. Follow these steps:	
12a. Copy your total current monthly income from line 11	
Multiply by 12 (the number of months in a year).	x 12
12b. The result is your annual income for this part of the form.	12b. \$
13. Calculate the median family income that applies to you. Follow these step	DS:
Fill in the state in which you live.	
Fill in the number of people in your household.	
Fill in the median family income for your state and size of household	pecified in the separate
14. How do the lines compare?	
14a. Line 12b is less than or equal to line 13. On the top of page 1, check Go to Part 3. Do NOT fill out or file Official Form 122A-2.	box 1, There is no presumption of abuse.
14b. Line 12b is more than line 13. On the top of page 1, check box 2, <i>Th</i> Go to Part 3 and fill out Form 122A–2.	ne presumption of abuse is determined by Form 122A-2.

Debtor 1	William Watson First Name Middle Name Last Name	Case number (if known)
Part 3	Sign Below	
	By signing here, I declare under penalty of perjur	ry that the information on this statement and in any attachments is true and correct.
commercial factors on the Australia	✗/s/ William Watson	* *
	Signature of Debtor 1	Signature of Debtor 2
documents and management as the	Date 11/16/2020 MM / DD / YYYY	Date MM / DD / YYYY
	If you checked line 14a, do NOT fill out or file	Form 122A-2.
	If you checked line 14b, fill out Form 122A-2	and file it with this form.

Fill in this i	nformation to identify yo	ur case:		
Debtor 1	William Watson			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the: Eas	tern District of New Yo	rk	
Case number				
(If known)				Check if this is an amended filing
			•	Chook if the letter and the letter a
Official F	orm 122A-1S	aau		
		***************************************	Presumption	of Abuse Under § 707(b)(2) 12/15
	-			
exempted from exclusions in	n a presumption of abus	e. Be as complete an	d accurate as possible.	come (Official Form 122A-1), if you believe that you are If two married people are filing together, and any of the emplete a separate Form 122A-1 if you believe that this
Part 1: Ide	ntify the Kind of Debt	s You Have		
personal, far		." Make sure that your		C. § 101(8) as "incurred by an individual primarily for a the answer you gave on line 16 of the <i>Voluntary Petition for</i>
	to Form 122A-1; on the top supplement with the signs		n, check box 1, There is n	o presumption of abuse, and sign Part 3. Then submit
🔲 Yes. Go	to Part 2.			
art 2: Det	ermine Whether Milita	ırv Service Provisi	ons Apply to You	
		-		
	sabled veteran (as define	d in 38 U.S.C. § 3741(1))?	
₩ No. Go				
	you incur debts mostly wh J.S.C. § 101(d)(1)); 32 U.S		duty or while you were po	erforming a homeland defense activity?
	No. Go to line 3.			
	Yes. Go to Form 122A-1; on Then submit this supplemental the complement of the compl			here is no presumption of abuse, and sign Part 3.
	ave you been a Reservis			
	omplete Form 122A-1. Do	• • •		
	_			ty? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1)
parameter 1	Complete Form 122A-1. Do			
Yes.	Check any one of the follo	wing categories that ap	oplies:	
-	was called to active duty 0 days and remain on acti	•	2001, for at least	If you checked one of the categories to the left, go to Form 22A-1. On the top of page 1 of Form 22A-1, check
П	was called to active duty	after September 11.	2001, for at least	box 3, The Means Test does not apply now, and sign
*******	0 days and was released t	•	*	Part 3. Then submit this supplement with the signed Form 22A-1. You are not required to fill out the rest of
٧	hich is fewer than 540 day	s before I file this bank	ruptcy case.	Official Form 22A-1 during the exclusion period. The
	am performing a homela	nd defense activity fo	or at least 90 days.	exclusion period means the time you are on active duty or are performing a homeland defense activity, and for
	performed a homeland d	-	-	540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).
	nding on file this bankruptcy case.	, which is fewer than	540 days before	If your exclusion period ends before your case is closed, you may have to file an amended form later.

B2030 (Form 2030) (12/15)

United States Bankruptcy Court

	Eastern District of New York	
ī	In re William Watson	
•		Case No.
D	Debtor	Chapter_ ⁷
	DISCLOSURE OF COMPENSATION OF ATTORNEY	FOR DEBTOR
1	1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify the above named debtor(s) and that compensation paid to me within one ye petition in bankruptcy, or agreed to be paid to me, for services rendered the debtor(s) in contemplation of or in connection with the bankruptcy of	ar before the filing of the or to be rendered on behalf of
v F	FLAT FEE	
	For legal services, I have agreed to accept	\$_5,000.00
	Prior to the filing of this statement I have received	
	Balance Due.	
R	RETAINER	
	For legal services, I have agreed to accept a retainer of	\$
	The undersigned shall bill against the retainer at an hourly rate of	\$
	[Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all C approved fees and expenses exceeding the amount of the retainer.	Court
2.	. The source of the compensation paid to me was:	
	Debtor Other (specify) Aisen Xia (Wife)	
3.	. The source of compensation to be paid to me is:	
	Debtor Other (specify)	
4.	. I have not agreed to share the above-disclosed compensation with are members and associates of my law firm.	any other person unless they
	I have agreed to share the above-disclosed compensation with a of the not members or associates of my law firm. A copy of the Agreement, tog f the people sharing the compensation is attached.	-
5.	. In return of the above-disclosed fee, I have agreed to render legal service bankruptcy case, including:	e for all aspects of the
	a. Analysis of the debtor's financial situation, and rendering advice to t	he debtor in determining
	whether to file a petition in bankruptcy;b. Preparation and filing of any petition, schedules, statements of affair required;	s and plan which may be

c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any

adjourned hearings thereof;

B2030 (Form 2030) (12/15)

d. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation of the Debtor in adversary proceedings and other contested bankruptcy matters.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

11/16/2020

Date

/s/ Douglas Pick, 1743996

Signature of Attorney

Pick & Zabicki LLP

Name of law firm 369 Lexington Avenue 12th Floor New York City, NY 10017 (212) 695-6000 dpick@picklaw.net

United States Bankruptcy Court Eastern District of New York

In re: William	Watson	Case No.
	Debtor(s)	Chapter 7

Verification of Creditor Matrix

The above-named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date:	11/16/2020	/s/ William Watson
		Signature of Debtor
		Signature of Joint Debtor

Death to Tennis Corp. 48-10 43rd Street Woodside, NY 11377

Eva Xia 48-10 43rd Street Woodside, NY 11377

Focus 15 LLC c/o Downing & Peck P.C. 17 Battery Place, Suite 324 New York, NJ 10004

Friends Up North Corp. 48-10 43rd Street Woodside, NY 11377

Friends Up North Corp. Woodside, NY 11377

Golden Focus, LLC c/o Downing & Peck P.C. 17 Battery Place, Suite 324 New York, NJ 10004

Gotham Gastroenterology 535 5th Avenue Suite 604 New York, NY 10017

Hyundai Capital America Attn: Legal Dept. 3161 Michelson Dr., 19th Fl. Irvine, CA 92612

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346

Mt. Sinai Beth Israel 116 Lukens Drive Riveredge Park New Castle, DE 19720

New York Pain Care 41 5th Avenue New York, NY 10003 NYC Dept. of Finance 345 Adams Street 3rd Floor, Legal Dept. Brooklyn, NY 11201

NYC Law Dept. 100 Church Street New York, NY 10007

NYS Attorney General 120 Broadway New York, NY 10271

NYS Dept. of Labor WA Harriman Campus Building 12, #256 Albany, NY 12240

NYS Dept. of Taxation and Finance Bankruptcy/Special Procedures Section P.O. Box 5300 Albany, NY 12205-0300

NYS Unemployment Insurance Fund P.O. Box 551 Albany, NY 12201

Office of the U.S. Trustee 201 Varick Street, Suite 1006 New York, NY 10014

Pick & Zabicki LLP 369 Lexington Avenue 12th Floor New York, NY 10017

Public Storage 4102 Northern Boulevard Long Island City, NY 11101

U.S. Dept. of Justice Box 55 Washington, DC 20044

United States Attorney One St. Andrews Plaza Claims Unit New York, NY 10007

Vincent Oshin Unknown